

STATE OF NEW-YORK.

No. 20.

IN SENATE,

January 12, 1842.

REPORT

Of the Trustees of the State Lunatic Asylum, with the documents accompanying the same, pursuant to the act of the Legislature passed May 26th, 1841.

TO THE HONORABLE THE LEGISLATURE OF THE
STATE OF NEW-YORK.

The Trustees of the "State Lunatic Asylum," appointed under the act of May 26th, 1841, being thereby required "by such committee of their number as they shall appoint, to visit institutions for the keeping and management of lunatics in this and other States, and inquire into their government, organization and internal arrangements, and submit to the Legislature a system for the government, discipline and management of the State Lunatic Asylum; and regulations for the admission of patients, so as to secure its benefits equally to all the counties of the State," respectfully submit the following

REPORT.

In compliance with the duties thus specifically enjoined, the trustees did appoint a committee of their number, who have visited fourteen of the twenty institutions of this kind, known to the trustees in the United States. They also addressed a circular letter to every such institution, and have received from most of them, very full and interesting answers. Much useful information, including the lights of recent experience, thus collected from practical sources, is appended to this report, and herewith submitted to the Legislature.

[Senate, No. 12.]

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Previous to the passage of the law under which the Lunatic Asylum at Utica has been erected, public attention had been partially awakened to the sufferings and wants of the insane. With the rapid increase of population in this State, the lunatic class had become so numerous, and their condition so wretched, as no longer to escape notice, or fail to excite the sympathies of a benevolent and Christian community ; and had there been no higher motive, the dictates of humanity, or even economy, were sufficient to have prompted a wise and frugal government to provide an institution whose ample accommodations might offer to all the insane of the State, but especially to the insane poor, the most efficacious means of comfort and recovery. The history of such asylums in other States, as imperfectly exhibited in the Appendix to this report, clearly shows that New-York has gone neither too far, nor too fast, in this part of her enlightened and energetic career.

Most of the ancients adopted the notion, which, even in the present day, some yet believe, that insanity is produced by a *supernatural* cause ; that it is a judicial infliction from the Almighty, for some aggravated violation of the divine law ; and that so signal a judgment from Heaven can be neither removed nor alleviated by any human means. No wonder, that, where such erroneous views prevailed, the victims of insanity were treated with cruelty, derision and scorn, sent forth as homeless wanderers, or terrified and starved into submission, loaded with chains and impured in filthy cells, without comforts and without compassion. Throughout the continent of Europe, "until the noble efforts of *St. Vincent de Paul* were crowned with success, the madman was either expelled from society as an outcast unworthy of care or compassion, or burnt as a sorcerer, without even those rude forms of justice which then prevailed. This pious man sacrificed every thing for these outcasts. He journeyed from land to land, to preach and propagate the cause of charity. His mission was to bring back the sympathies of our nature to their proper channels ; to proclaim that the darkened vision was as much the visitation of God as the darkened mind, and that Christianity demanded of the humane and powerful to protect, and of the skilful to relieve both alike. The hearts of nations responded to his call. He became the emancipator of thousands of the diseased, the reviled and the persecuted. Of the same type and mould as La Rochefoucauld and Howard, he worthily obtained the glorious epitaph, 'The father of the poor, the steward of Providence.'

The monks were, at that time, the chief depositaries of medical science, as well as of most kinds of learning, for all Europe, and to their special care, through the efforts of this philanthropist, were the insane generally committed. "For nearly two centuries these religious recluses discharged this trust," no doubt, in many respects, with great fidelity; yet how ignorantly and barbarously, in other respects, may be judged from the treatment, said to have been pursued, at a convent in the south of France, where "*every lunatic received regularly ten lashes per day!*"

The wonderful achievements of Pinel, the great French reformer, mark the next memorable era in the history of insanity. Some of the details, full of interest to every feeling heart, may be found in the Appendix.

From this period, 1792, may be dated the commencement of a total revolution in the prevailing opinions of medical men and legislators respecting the insane, and in the avowed principles upon which lunatic hospitals should be conducted. The mere *safe custody* of the patient, no longer constituted the chief aim of such an institution; its higher ambition was to discover and employ means which were likely to restore to their places and duties in society a portion of the inmates, and to reconcile the remainder to their confinement.

Great advances have been constantly making, ever since, in the knowledge of the causes, pathology and treatment of insanity. Much of the mystery in which it was long shrouded, has been dispelled, and insanity is now brought as really within the scope of scientific investigations, as consumption or fever. It is generally conceded, that, *mental derangement is the result of some bodily disease which affects the brain*. An eminent medical writer says, "it is an established fact, that diseases of the mind cannot take place in a sound, healthy condition of the brain; but they are *the consequence* of and *dependent upon* a morbid condition of that organ. This is probably only *functional* in its *early* stages, (or if structural changes then exist, they are too slight for detection,) but in process of time, unless removed, it becomes, *structural*, and thus renders the organ incapable of resuming

its natural functions as connected with the operations of the mind.* This doctrine being admitted, it is evident that the sooner the treatment is commenced after the attack of disease, *before any organic changes are produced*, the greater the chance for its removal; and it is satisfactorily demonstrated that *of such recent cases of insanity, about the same proportion may be cured*, as of ordinary fevers of a *high grade*."

A learned and experienced surgeon, now living, W. A. F. BROWNE, of Montrose, in Scotland, says "Insanity is inordinate, or irregular or impaired action of the mind, (of the instincts, sentiments, intellectual, and perceptive powers,) depending upon and produced by an organic change in the brain; the extent of the disease corresponding to the extent of the destruction or injury of the nervous structure.† It is here particularly worthy of notice, that being strictly *a bodily disease*, the natural intensity and aggravations of insanity must be regulated, in a great measure, by the relation of the brain to the other organs of the body, and the relation of both of them to external agents; and that if such a dependence exists, an equally intimate connection must be concluded to obtain between the means of cure and the state of the organs and external agents." (*Browne on Insanity: page 6.*)

Such views of the causes and nature of insanity, though now generally prevalent, have been very cautiously received. The improve-

* *Spurzheim* says "the proximate cause of insanity is corporeal. (1) The manifestations of the mind, certainly may be deranged; but I have no idea of any disease, or of any derangement of the mind itself, or the soul, which is an immaterial being. The soul cannot fall sick, any more than it can die. I consider the mind as always intact, and only disturbed in its manifestations by disorder of its organs." (*Spurzheim on Insanity: page 96.*)

† "A great error has arisen," says Newnham, and has been perpetuated even to the present day, in considering cerebral disorder as *mental*, requiring, and indeed admitting, *ONLY* of moral remedies, instead of these forming one class of curative agents; whereas the brain is the mere *ORGAN* of the mind, not the mind itself; and its disorder of function arises from its ceasing to be a proper medium for the manifestation of the varied action and passion of the presiding spirit. And strange as it may seem, this error has been consecrated by a desire to escape from the fallacies of *materialism*. Yet it is manifest that they alone are guilty of the charge of materialism, who consider the disorder of the cerebral functions as *mental*, for then indeed, the brain must be *mind itself*, and not simply its organ." *Christian Observer*, vol. 29, page 266.

(1) It is mortifying to reflect that this physiological fact, when recently promulgated by Spurzheim, had nearly the freshness of a new discovery, although clearly suggested two centuries ago, by the far-reaching and immortal mind of Bacon. Speaking of diseases of the mind, he adds, "The absolute source, if carefully developed, will be found to exist in corporeal changes, or the effects of external changes acting upon the gross machine, and not primarily on the immaterial principle; as has unfortunately for the subjects of disease, been too commonly apprehended." *Novum Organon*.

ment in its medical treatment has been so slow, and the adoption of proper *moral* treatment so gradual, that even in Great Britain, a *reformed system* was not extensively adopted prior to 1815. Up to that time, the pernicious errors and absurdities of the old practice were generally retained in nearly all the lunatic asylums of that island; the atrocities of a "time sanctified system of *force*" yet lingered within their walls, while *moral treatment* was untried; all classes of patients were crowded together, without occupation and without comforts; their keepers coarse, uneducated, cruel; and their physicians, too often careless and ignorant.* The parliamentary investigations of 1815 and '16, brought to light so many of the *wrong principles* upon which such institutions had been conducted, and so much of their *practical mismanagement*, that public opinion at once insisted upon thorough, radical reform. Such reform has been effected; and so extensively, that at the present day, the *reformed system*, throughout Europe and the United States, is the only one that finds favor or approval.

* The entire disuse of corporeal punishment, and the substituting of the vigilant eye of a well qualified attendant for confinement and chains, are two delightful characteristics of the new system. The lash is no longer recommended as a medicinal instrument for the insane. Restraint, or bodily coercion, on the new plan is seldom resorted to; some times it is indispensable, as a source of protection, generally for a short time only; on other pretexts it is cruel and oppressive. Formerly, asylums were constructed upon the principle that 95 in 100 needed to be confined, while only 5 in 100 could be entrusted with freedom; now, arrangements are made to give freedom to the 95, and provide restraint only for 5; and some of the largest establishments boast of having only one or two irreclaimable patients, and of having discarded strait waistcoats, as well as stripes.† The cruel fallacy, long acted upon, that the insane were insensible to cold, and to other modifications of pain, is exploded; and under the new system, they are treated with the tenderest care, and ample provision is made for their every physical

* In one large English asylum, the superintendent sometimes absented himself two months: in another, with 500 patients, it was an established rule, that "*all, without any reservation, should be bled in June, and take each four emetics per annum!!*"

† Doctor BELL, the accomplished superintendent of the M'Lean Asylum, at Charlestown, Mass. in his annual report for 1839, says, "We never have had occasion, since the institution has been under my care, to use strong rooms as places of permanent detention, a few weeks being the extent of time which they ever have been occupied by a single person." Again he says, "Not one per cent of our whole number is, on an average, under any constraint, even that of confining the hands with the mittens."

want. The old system inculcated that insane minds could not be stung by insult or shame, dishonor or injustice; the new teaches that "harshness and abuse fall with ten-fold force upon minds impaired and enervated by disease; that in most cases of insanity enough of intelligence and feeling are retained to render the patient fully sensible of the import and the cruelty of what is said; and that in many cases the mind, instead of becoming obtuse, or deadened, is endowed with an unusual sensitiveness, with an acuteness of perception, upon which the insults and insinuations of the rude, or the indelicate, or the cruel, must produce the most aggravated pain." The reformed system allows no cruelty, of any kind, to be inflicted under the ridiculous name of punishment, or the more specious pretext of preserving order; nor does it consider any infliction of physical suffering as efficacious in eradicating or alleviating mental disease. On the old plan, only one attendant was provided for 30 to 60 patients; on the new, one for five to ten.* Formerly, the chief aim seemed to be to procure *cheap* attendants; now, to obtain *good* ones. On the new plan, none are employed, for this delicate and difficult task, but well educated persons, of moral worth, actuated by a high sense of duty, and possessing sound, discriminating judgment, firmness, sweetness of temper, conciliating manners, unwearied patience, and inexhaustible kindness.† The medical responsibility, on the old plan, was so distributed, that no one felt it as his own; now, under efficient supervision, it is made to rest so entirely upon *one*, the superintendent or physician *en chef*, that he dare not be unfaithful, for his own reputation is fully identified with the good character and success of the institution. The new system of *moral treatment* is very effective, and includes classification, employment‡ and

* In some old asylums "three keepers were expected to guide, govern and soothe 250 patients; in another, 164 were committed to three keepers. Formerly, at Bethlehem, (usually known as *Bedlam*,) near London, every female keeper had 60 patients under her care. The law now, in France, accords one attendant to ten lunatics; but M. Esquirol says that number is not sufficient; the best practice gives one to five.

† The difference between a timid, illy qualified attendant and one of tact and efficiency, is strikingly illustrated by a case which occurred, not many years since in England. "In one hall of an asylum, recently erected, not fewer than 18 out of 27 male patients were chained, muffled, or strapped to their seats. A new keeper, when first entrusted with the care of them, was cautioned that his life would not be safe for an instant, unless he adhered to the rigid plan then existing. But a brighter destiny has dawned upon these unfortunate patients. The new keeper (a disciple of the new system) tried milder means, with entire success. In the very same hall, containing the same number of persons, and many of the same individuals, there is now only *one* requiring restraint." *Browne's Lectures*, p. 77.

‡ "LABOR, properly pursued, is found to be a most efficient auxiliary in effecting a cure, when the patients are *persuaded*, not *compelled*, to engage in it." *Visit to Retreat near York*, p. 14.

amusements, stated religious services with proper restrictions,—direct appeals to the affections, by means of kindness, discipline and social intercourse,—indirect appeals to the mind, by means of the site, plan, ornaments and furniture of the edifices of the asylum, and the order, neatness and beauty of the gardens and grounds,*—and scrupulous regard to all those little, nameless, every-day details which affect personal comfort. "This whole scheme of moral treatment," say the trustees of the hospital at Worcester, Massachusetts, "is embraced in a single idea, HUMANITY—the LAW OF LOVE—that *sympathy* which appropriates another's consciousness of pain, and makes it a personal relief from suffering whenever another's sufferings are relieved." (*Reports*, p. 41.)

Such are some of the principles and outlines of practice, adopted, at the present day, in the best regulated institutions, especially in the United States, for the reception and *cure* of the insane. This is the *new system*; and its adoption for the State Lunatic Asylum at Utica, is cordially recommended by the trustees.

To carry this system into effect, the trustees, after much deliberation, propose that the internal government, discipline and management of the asylum be entrusted to four officers, namely, a superintendent, who shall also be principal physician, a steward, an assistant physician, who shall be, *ex officio*, the apothecary, and a matron; all to reside in the asylum, and to be aided by an adequate number of attendants and assistants. Each individual's qualifications for office, or for a place under the officers, should be closely scrutinized, before a choice is made; afterwards, those in every station who, on trial, prove competent and faithful, should be liberally compensated, and permanently retained. For attendants as well as officers, the asylum should be their dwelling house, and their place of business; insanity should be their study, as long as the care of the insane is their employment; the amusements of the patients should be *their* amusements; their greatest pleasure should be found in the thousand nameless offices of kindness, and their highest gratification and reward in witnessing the comfort and convalescence of those under their care.

* In 1832, a benevolent citizen of Massachusetts left, by will, \$500, "for ornamenting the hospital grounds at Worcester, by constructing walks, and planting trees, shrubs and flowers, so as to render said grounds an object of tasteful regard to citizens and visitors, and of refreshment and gratifying interest to convalescent patients and inmates of the institution." Will not some citizen of Oneida county do as much for the lunatics of this State?

Nothing can be more important than the selection of a well qualified superintendent: the success of the institution will mainly depend upon the judicious choice of this officer. He is to hold the chief executive power, and will be, in fact, governor of the asylum. The inmates are all *his* patients; he alone directs their treatment, medical and moral. The three other officers, high as they severally may be in worth, honor and influence, are his subordinates, and cooperate in all his plans. He should, therefore, be held responsible for the entire management of the institution; and he should be clothed with proportionate powers.

Where is the individual, whose high and varied qualifications, moral, intellectual and physical, in rare but indispensable combination, fit him for such multifarious duties? To whom is such a sacred and momentous trust to be confided? To an active, charitable, conscientious man, of good sense and mild manners, with perfect self-command, and a thorough knowledge of human nature; to a well educated physician, of tact, firmness and experience, familiar with the improved medical and moral treatment of insanity; to an energetic philanthropist, of calmness and decision, of moral and physical courage, who is never weary of *doing good*, whose benevolence can make the lunatic a companion and friend, in all the essential qualities of reciprocal confidence, mutual forbearance, fellow feeling and rational counsel, and whose refined sense of duty "guides even kindness and affection in their ministrations, and holds the balance as scrupulously in deciding on the moral rights of the insane, as on the civil rights of other citizens."

That such a person can be found, the trustees confidently believe. To secure his services, it is necessary to offer a liberal salary, and to render the tenure of office as permanent as is consistent with the interests of the State.

As to the appointing power, and the cognate subjects of compensation and removals, the trustees believe the following plan will be the safest and best. Let the board of trustees be empowered to nominate and appoint the superintendent, and a treasurer, subject to the approval of the Governor of the State for the time being, with such salaries as they may deem just and reasonable. Let them, also, appoint, upon the nomination of the superintendent, the steward, assistant physician and matron, and fix their salaries. Let the salaries of all the officers be paid by the State, through the treasurer of the asylum, quarterly, under suitable regulations prescribed by law. Give to the superinten-

dent the sole power to appoint and dismiss all attendants and assistants ; to fix their number and compensation, under the direction of the board of trustees, and prescribe their respective duties and places ; but every dismissal, with the cause of it particularly stated, should be recorded, under an appropriate head, in one of the books of the asylum. Give him also, power to suspend, for not more than thirty days, for good and sufficient cause, the steward, assistant physician, or matron ; but in such case he should be required forthwith to give written notice of the fact, with all attending circumstances, to one of the trustees, so that a special meeting of the board may be called to provide for the exigence.

The annexed "System of Rules and Regulations," (*marked A,*) proposed for the asylum, and herewith presented to the Legislature, as part of this report, so fully exhibits the further powers and duties of the superintendent, together with those of the other resident officers, and of the attendants and assistants, that the trustees omit all further details here, and respectfully refer to that paper, which they have carefully compiled from systems now in use in similar institutions. But they can not leave the subject, without suggesting the propriety of a legislative enactment, exempting from serving on juries, and from militia duty in time of peace, all the resident officers, attendants and assistants of the asylum.

The treasurer should reside in Utica, but not in the asylum. Before entering upon his office, he should give bonds for the faithful performance of his trust, in such sum, and with such sureties, as the Comptroller of the State shall approve. He should have the custody of all moneys, bonds, mortgages, notes, title deeds, and other papers and documents relating to the property of the asylum. He should be required to open an account, in his own name as treasurer of the asylum, with one of the banks in the city of Utica, to be selected with the approval of the trustees, and to deposit all moneys, immediately upon his receiving them, in such bank. He should keep a book of blank checks, and in drawing for money, use said checks, and note on the margin of each, to be preserved in said book, the date, amount, name of payee, and on what account ; and these notes should be copied into the bank account on the books of the asylum. He should keep in a journal and ledger, to be furnished by the institution, an account of receipts, an account of expenditures, an account with the bank, and with the superintendent, and such other accounts as may be necessary ;

specifying on the journal names and objects, with every item. He should pay out money only upon the written order of the steward, specifying the object of the payment, countersigned by the superintendent. To prevent errors and ensure strict accountability, the treasurer's accounts, with his vouchers, should be examined by an auditing committee of the trustees, quarterly, and compared with those of the steward: the results of every such examination should be duly certified by the committee, reported to the trustees, and entered in a book to be kept by the trustees for that purpose. Annually, on the first day of January, he should fully report to the board the operations of the treasury for the preceding year. The law should authorize suits to be brought in the name of the treasurer for moneys due to the asylum.

The general interests of the asylum should be confided to the board of trustees, who should, annually, before the first day of February, make to the Legislature a full and detailed report of the doings and condition of the institution during the year ending December 31st. The trustees should be authorized to establish and enforce suitable by-laws for the regulation of their own proceedings, and for securing system, discipline, economy, and efficiency in the performance of duty in every department of the institution. They should also be authorized to take and hold, in trust for the State, any grant or devise of land, or any donation or bequest of money or other personal property, to be applied to the maintenance of insane persons, or the general use of the asylum. They should, further, have power, within certain limits, to admit persons, upon the certificate of the superintendent that *he* deems the applicant a suitable patient; and to agree upon the price of board, &c.: also, under proper restrictions, to discharge the cured, and to send back, after a certain time, to their respective homes, those who are not likely to be benefited or improved by longer treatment in the asylum: also, to direct the superintendent, in proper cases, to aid, from the funds of the institution, moneyless patients on leaving the asylum, so far as will supply their wants for a few days, until they can reach their friends, or obtain a situation to earn a subsistence.

As an efficient system of inspection is one of the surest preventives of the abuses that are apt to creep into large establishments,* one of

* On old plan, where security was a *primary object*. "I once" says Tuke, "visited a house for the insane, and found three of the keepers, in the middle of the day, earnestly employed in playing cards!"—*Description of the Retreat at York, &c.* p. 107.

"Even as lately as 1837," Browne says (*see Five Lectures* p. 147,) in an institution of considerable reputation, "a new mode of economizing the labors of attendants, was to keep the patients in bed all Sunday, that *the attendants might visit their friends!*"

the trustees should be required to visit the Asylum, for inspection, every week, a majority of the board once every month, and the whole board once a year. At the weekly visits, which should not be always on the same day of the week, the visitor, besides inspection, may hear complaints, counsel with the superintendent, and suggest improvements. At every such visit, before leaving the house, the visitor should carefully enter under his own proper signature in a "Visitors' Book," to be kept by the trustees for that purpose, the date and circumstances of the visit, with his remarks of satisfaction or censure, as to the condition of the house, patients, grounds &c. Ample time should be set apart for the monthly and annual inspections, beyond the possible interference of ordinary business. These visits should be made when the officers do not expect, and are not prepared, and should be *searching*; so that each visitor may know for himself, *how every thing is going on*; he should *see every patient*, and critically examine every department of employment and expense; he should actually inspect every ward, hall, and apartment, and see that the beds and bedding are clean and in good order, that rooms and floors, and every part of the premises clean and free from all offensive matter; and that the bread and provisions served to the patients are of good and wholesome quality, and well cooked; and especially whether the patients are well used and kindly treated by the attendants. The results of each visit to be recorded in the visitors' book, as above; and signed by all the trustees present.

Before the trustees suggest any "regulations for the admission of patients, so as to secure the benefits of the asylum equally to all the counties of the State," as required by the Act of May last, a preliminary inquiry seems proper as to the classes of lunatics who are to be admitted. The institution will, at least until more of the buildings according to the original plan* are completed, be mainly an asylum for the *insane poor*; including, besides paupers, a highly respectable class of persons, of small property, whose industry and economy render them independent while in health, without lessening their just claims upon the community for aid under the sore visitations of insanity. A much smaller class, called *criminal lunatics*, consists of those persons who have been arrested for some indictable offence, but have escaped indictment, or been acquitted on trial, upon the ground of their being insane.

* See Commissioners' plan of four extensive halls with wings, approved by Gov. Marcy, July 30, 1838, and sanctioned by former Legislative action; hereto annexed, marked G.

All of this class should be received, upon the production of authentic evidence, in each case, of such a state of facts.

By existing laws in this State, another class of lunatics are considered "*dangerous to go at large*," and may, on complaint, be confined by order of two justices. The trustees have no means of judging how numerous this class is; but they suppose it is large, and fear lest it should sometimes be improperly augmented. They, therefore, suggest such an amendment of the law, as will interpose greater safeguards against an erroneous decision, which, at the instance of avaricious or unfeeling relatives, might deprive a sane man of his property and confine him as a lunatic. The trustees are happy to believe that cases of such illegal deprivation and imprisonment have rarely, if ever, happened in this country, though they have been of frequent occurrence in Europe. It is proposed that to establish the charge of lunacy before two justices, it shall be necessary, besides other evidence, to produce that of a respectable practising physician, whose affidavit or affirmation should be filed; and that the alleged lunatic, or his friends, be permitted to appeal to a county judge, and secure a trial by jury. As further precautions, the justices and judge should be required to file all the papers, with their decisions, in the office of the county clerk, who should keep in his book of miscellanies, a tabular registry of all such cases, with dates, names and residence of parties and officers. Whenever any of this class are sent to the asylum, the facts of each case should be attested by the official seal and certificate of said clerk.

Another kind of classification should have due influence in assigning preferences for admission. The *incurable** should not be received or retained to the exclusion of the *curable*; and of the latter class *recent* cases should always be accommodated rather than *old* ones.† For it is apparent, that, if all are indiscriminately sent, with its present accommodations, the asylum will soon be filled with old and incurable cases, to the exclusion of others more hopeful.

The trustees have been unable to get at the actual number of the insane in the State. The United States census of 1840 gives New-York

* Of this class it is estimated that (1.) *homicides* are about 1 in 100; (2.) the *paralytic* and *epileptic* about 10 in 100; (3.) the *imbecile*, *fatuous* and *idiotic* about 20 in 100.

† Too much importance cannot be attached to this distinction; it has been already insisted upon in this report, and confirmation is found in almost every communication and article in the Appendix.

2,428,921 population, and 2,340 lunatics and idiots, of whom 739 are at public expense ; being one lunatic or idiot to every one thousand and thirty-eight inhabitants. The State census of 1825, compared with that of 1835, (see tables, marked B, C and D, at end of this report,) presents the following facts :

	1825.	1835.
Population of New-York,	1,616,458	2,174,517
Idiots,	1,421	1,487
Of whom at public charge,	442	508
At private expense,	979	979
Lunatics,	819	1062
Of whom at public expense,	184	382
At private expense,	635	680
Lunatics and idiots,	2,240	2,549

Hence it appears there are more idiots than lunatics in the State ; lunatics increased 143 in ten years ; and the aggregate of lunatics and idiots in 1840 was 100 more than in 1825, but 209 less than in 1835.

The Secretary of State, April 27, 1841, reported to the Legislature 803 lunatics in the State supported at public charge ; adding 17 for Washington and Warren, and none being returned from Hamilton, Madison, Queens, Richmond and Ulster.

In the hope of a nearer approximation to the true number of *insane paupers* in the State, the trustees addressed circulars to all the county clerks, but have had the pleasure of receiving answers from only thirty-four. A schedule (marked E) following this report, exhibits the facts thus collected. It shows, in these 34 counties, 263 lunatic paupers, in jails and poor houses ; besides 305 of the same class in the New-York City Lunatic Hospital on Blackwell's island. If insane paupers bear the same proportion to the whole population, in the counties not heard from, as in those returned, namely, 1 to 4,868, then the former have 167, as per schedule (marked F) hereto annexed ; making in all, exclusive of Blackwell's island, 430 *lunatic paupers* in the State, now confined *in jails and poor-houses* !! Previous to the erection of the State Lunatic Hospital in Massachusetts, 30 of the same class were

found in the prisons of that State. A description of their wretched and hopeless condition, given by the commissioners, may be found in the Appendix, (marked No. ,) and it is to be feared that it is applicable, in many particulars, to scores in this State similarly situated.

Whatever of defect and uncertainty attach to these various returns, they may be relied upon to show how inadequate the edifice now on the point of completion, is to meet the wants of the insane population of the State.

"To secure the benefits of the asylum equally to all the counties of the State," might, at first view, seem to require that the number of persons admitted to the asylum from each county should be in proportion either to its population or to its taxable property. But the fallacy of such a ratio will appear, by looking at the nature of the benefits offered by such an institution. That county is the best off, in this respect, which has the least occasion for such benefits. A populous and wealthy county desires no fuller representation in the State Prison than a small, poor one. Besides, there are already private and public asylums in different parts of the State, and on its borders, where many of the insane of some counties are, and will be accommodated. This circumstance has a bearing upon the practical operation of any rule of equalization that may be adopted: so has the fact that the chances of cure are many fold greater in some cases than in others; for the whole State, as really as every county, has a direct interest in the recovery of the greatest number in the shortest time. Upon the whole, the trustees are of opinion, that, the *insane population* of the several counties furnishes a just and proper ratio for apportionment, with slight modifications. The superintendent might, from time to time, give each county notice of its quota, upon this basis.

In view of these facts and principles, the trustees return to the topic of admissions; and, after the most deliberate consideration, recommend the following REGULATIONS, for the first year, at least, after the opening of the asylum.

I. All *criminal lunatics* to be admitted, as already specified, to the asylum.

II. Of the class deemed "*dangerous to go at large*," (1) all now in jails, and (2) all future cases of commitment, should be admitted to the asylum; (3) of those already committed to poor-houses, or con-

fined in other places than jails, all cases of disease not exceeding two years, should be admitted to the asylum, under such restrictions or limitations, if found necessary, as the superintendent shall make, with the approval of the trustees.

III. Of *insane poor*, (1) one "*recent*"* case from each county in the State; (2) others, new or old, as many, above one, as each county is entitled to according to the ratio of insane population; as aforesaid.

IV. Of all other classes, such *recent** cases, not exceeding fifty, as may seek admission under peculiarly afflictive circumstances, or which may promise, in the opinion of the superintendent, very great chance of recovery; under special agreement with the superintendent, whenever there are vacancies in the asylum.

V. No patient should be admitted for a shorter period than six months, *except* cases received within sixty days after the first decided manifestation of the disease.

VI. Superintendents of poor, or the supervisors of counties which have no superintendents, should be directed to designate the individuals to be sent from their respective counties, pursuant to the above regulations.

VII. Before their admission, all patients, whether paupers or not, especially those from jails or poor-houses, must, at the expense of those sending them, and by legal requirement, be put into a state of perfect bodily cleanliness, and be provided with at least one suit of good clean woollen clothes, with a change of woollen socks, waistcoats, and drawers, and all other necessary articles of clothing.

VIII. To aid the superintendent in a proper classification of patients, as soon as admitted, each patient should be accompanied with a full and accurate history of his disease, habits, and pursuits, to be furnished by those sending him, from the most authentic sources within their reach, stating his place of birth, and if not a native, when he

* "*Recent*" in these "*Regulations*," means a case of *first* attack, and of disease of not over six months' continuance.

came to this country ; also, as full answers to the subjoined "*queries*" as can be had.*

* QUERIES.

Relatives or guardians, with the assistance of a physician who is acquainted with the case, are requested to annex precise answers to as many of the following questions as are applicable.

QUERIES.

ANSWERS.

1. What is the patient's age?
Married or single? Number of children, if any?
2. Employment, and reputed pecuniary circumstances?
3. What were the first evidences of mental derangement?
4. What changes have occurred in the mental or bodily condition since the attack?
5. Does the disease appear increasing, declining, or stationary?
6. Is deranged mind evinced indifferently on various subjects, or chiefly on a few or single one?
Mention particularly any permanent hallucination or mental deception?
7. Are there any periodical exacerbations or improvements?
Any entirely rational intervals?
8. Has suicide or other self-injury been attempted?
In what manner? Is the propensity now active?
9. Has any disposition to injure others been evinced? if so, was it premeditated, or in a sudden passion?
10. Is there a disposition to tear clothes, break glass, &c.?
to filthiness of person and habits?
11. Has any restraint or confinement been employed, and if so, what kind?
12. Has there been any former attack? When, and of how long duration?
13. What connections, including grandparents and cousins, have been insane?
14. Before the accession of insanity, what were any remarkable peculiarities or eccentricities in the patient's disposition, temper, deportment, habits, or pursuits?
Mention, especially, predominant passions, religious impressions, any kind of habitual intemperance, as the use of ardent spirits, tobacco, &c.
15. The history of any bodily disease, the suppression of evacuations, eruptions, sores, epilepsy, palsy, injuries, &c., which may have a bearing on this attack?
16. What are considered, amongst friends and neighbors, to have been the causes of the derangement?
17. What curative means have been pursued, and the effect?
Mention, especially, whether depletion by blood-letting, leeches, cathartics, low diet, &c., has been employed, and to what extent?

IX. When the asylum shall be fully organized and furnished, and ready to admit patients, public notice of the fact should be given by the trustees, for at least two weeks, in the State paper, and sent to the clerk of every county for general promulgation. With the notice to county clerks, should be a circular from the superintendent, designating different days for the counties, severally, to send their respective quotas of patients; this would secure order and prevent a rush from all parts of the State at once.

The discharge of patients is another delicate and difficult subject. At present the trustees will suggest but two or three rules: more can be provided when experience shall have shown what are necessary.

Authority should be given to the trustees, (1) upon the superintendent's certificate of *complete recovery*, to discharge any patient, excepting a criminal lunatic; (2) to send back to their respective homes when the want of room makes it expedient, any of the "dangerous" class, who shall have been in the asylum one or more years, upon the superintendent's certificate, that such persons are now, and probably will continue *harmless*, and not likely to be benefitted or improved by further treatment in the asylum.

It is the deliberate opinion of the trustees, that, in sending paupers to this institution, county and town officers should be permitted to discriminate carefully, with suitable aid from medical practitioners, in selecting those who are *most likely to be cured*. It is certainly better *not to send unfit patients*, than to have to *send them back* again. How forcibly this is enjoined by motives of *economy* may be seen by reference to "Table 20," extracted from Reports of the Massachusetts State Lunatic Hospital, at Worcester, which table is to be found under the "Massachusetts" head, No. 3 of the Appendix to this report, and presents in contrast the expense of 25 recent cases, most of which were *cured*, and that of 25 cases of long standing and chiefly *incurable*. The former cost \$14,000, while the others cost \$47,500; a difference of \$33,500 in favor of the curable.

As to the mode by which the expense of supporting the inmates of the asylum is to be defrayed, the trustees are of opinion, that the present legal provisions should remain unchanged as to the liabilities for the support of paupers, and the "dangerous" class; requiring the expenses to be defrayed by the patient or friends, if of sufficient ability,

[Senate, No. 20.]

otherwise by the county or town. But they would suggest, that after the first day of January next, payment be required, in every case, semi-annually, or quarterly, in *advance*. Whether the "criminal class" shall be a State or county charge, is for the Legislature, in their wisdom, to decide.

The price to be paid for keeping the poor, or any person in indigent circumstances, in the asylum, should, in no case, exceed the *actual cost* of support and attendance; exclusive of officers' salaries, and the outlay for ground, buildings and furniture: and the trustees should be authorized to admit into the asylum, at their discretion, for one year, if not sooner cured, at a less price, one indigent person from each county, suffering under insanity of *not over six months'* continuance, whether supported or not by any town or county.* In this way the expense will probably never exceed \$2, or \$2.50 per week, which is less than other asylums generally charge. To be sure, in poor-houses and jails, (as appears from schedule E.) in 34 counties, the average weekly expense is below \$1. But in that average, for the most part, the great *extra expenses peculiar to lunacy* are left out; so that the estimate is deceptive. Besides, when the increased safety and comforts of the asylum are considered, and more than all, the greatly increased *probabilities* of speedy recovery,† it is evident that the *higher* price is the *cheaper* one.

The trustees have received from the Commissioners, three communications, herewith submitted, and annexed, (marked G, H, I,) showing the original plan of the buildings, and how nearly one of them is

* The managers of the Retreat at Hartford, Ct. which the trustees consider one of the *best Lunatic Asylums* in the world, admit *ten indigent lunatics*, being inhabitants of the State, whose disease does not exceed six months, at \$2 per week, for 6 months; which is \$1.50 below their usual price.

"To induce the friends of the insane to send them early to the retreat, the directors have ordered an *abatement of four shillings*, (nearly \$1,) *per week*, for one year, from the bill of those who enter within six months of the first decisive symptoms of the dreadful malady." *Visit to Retreat near York*, p. 17.

"Of 505 cases received, 80 *per cent* were cured of those admitted within 3 months of first attack; 59 *per cent* of those admitted within 12 months; while only 26 *per cent* were cured of cases of over a year's duration." *Ib.* p. 18.

† The little chance of recovery in jails &c. under the commitment by two justices, is fearfully shown by "*thirty years' experience*" of the system in Massachusetts. The Commissioners of that State say, "This system has at once removed the most hopeful cases beyond the reach of recovery. It may be emphatically repeated, *beyond the reach of recovery*; for, from all the inquiries made by the Commissioners upon this subject, they have never heard of more than three or four instances of restoration among all those who have been subjected to the rigors of such confinement; while well regulated asylums for the appropriate treatment of the insane have returned 50 or 60, and in some instances, 90 *per cent* of recoveries." *State Lunatic Hospital reports*, p. 17.

now ready for use. They also show that the appropriation for last year, for finishing and furnishing the buildings is nearly exhausted upon the former, and ask an additional appropriation, which they estimate at \$16,000 for the purchase of furniture. The trustees, without having fully examined this estimate, commend the object to the favorable consideration of the Legislature, with this suggestion, that the selection of the furniture be confided to the superintendent.*

The yards, gardens, avenues and grounds about the asylum, are without trees and shrubbery, and have not yet been properly laid out, or even enclosed. No time should be lost in providing liberally for these necessary improvements; for which the trustees believe \$2,000 will be an adequate appropriation. The accompanying communications from other asylums, (see Appendix,) show how highly, and how generally this object is appreciated.†

Payments for the support of lunatic paupers under existing laws will not be made in advance, and cannot be required in the several counties oftener than once a year. Therefore, to enable the asylum to make suitable provision for the support of its inmates as soon as it shall be opened, a small appropriation will be required. Persons of experience in the management of similar institutions, have estimated the amount which is likely to be needed for this purpose at \$10,000. It is not certain that so large a sum will be required; but to cover even the *contingent* necessities of the institution, the trustees recommend an appropriation of that amount.

The trustees take great pleasure in tendering their grateful acknowledgements to the several institutions visited by their committee, for the kindness and civilities extended to them, and the interest manifested in the object of their visit.

In conclusion, the trustees indulge the opinion, that, under such an organization, and a system of discipline and management as is herein indicated, the Asylum will fulfil the benevolent objects of the Govern-

* The Legislature of Massachusetts, March 24, 1832, appropriated \$20,000 for furnishing the State Lunatic Asylum at Worcester. *Reports*, p. 6.

† The "York Lunatic Asylum," in England, "is approached through an avenue, nearly a quarter of a mile in length, thickly shaded by lime trees." The *Pauper Lunatic Asylum* at Wakefield, is "nearly hidden from view by the trees and shrubbery by which it is environed;" and throughout the gardens, lawns and grounds, which are tastefully laid out, "the gravel walks are bordered with flowers in great profusion, chiefly cultivated by the patients."—*Visit to Asylums*, p. 44.

ment, and the just expectations of the community. Yet, it should not be forgotten, that, what the State has now done—the erection of the present edifice*—forms but the smallest and most insignificant link of a mighty chain of “merciful measures, which must lengthen with our increased acquaintance with the laws of the human mind, and the privations of that mind, and can only terminate when the insane are out of the land.”

DAVID RUSSELL,
W. H. SHERMAN,
N. DEVEREUX,
CHARLES B. COVENTRY,
T. S. FAXTON.

Utica, January 7th, 1842.

* This one will accommodate only 250 or 300 persons; when the other three buildings are finished, 1,000 may be accommodated.

(A.)

SYSTEM
OF
RULES AND REGULATIONS
PROPOSED FOR THE
NEW-YORK STATE LUNATIC ASYLUM, AT UTICA, 1842.

"The whole system of moral treatment of the insane may be summed up in two words, KINDNESS and EMPLOYMENT."—JACOBI.

I. RESIDENT OFFICERS OF THE ASYLUM.

1. SUPERINTENDENT.
2. STEWARD.
3. ASSISTANT PHYSICIAN.
4. MATRON.

INTRODUCTORY REMARKS.

This Asylum has been erected, at great expense, by the State, that the insane may have a safe retreat, in the care of those who have learned the true mode of managing them; in whose hands they may be rescued from the cruelties and coercions which they generally meet with in the world; and where, under the benign restraints which kindness and benevolence impose, they may have every chance of recovery.

The very first impulses of insanity are met at home and amongst friends, by resistance and opposition, from those who before yielded willing obedience to requirements, or who have acquiesced with cheerfulness in every reasonable indulgence. The apparent difference in the conduct and feelings of their friends, excites collision, arouses the passions, and awakens the prejudices of the victim of delusion. They now feel that the friends whom they loved and enjoyed have turned against them; that they purposely thwart all their plans, oppose all their desires, and resist what they conceive to be their own best efforts

to promote the happiness of both. The insane resist all these with violence, and indulge in wrath and bitterness against them.

For these reasons it becomes desirable that they should be removed to the care of strangers, whose efforts to make them comfortable, they often appreciate correctly and acknowledge gratefully. From strangers they will also submit to restraints without a murmur, which would excite the greatest hostility to friends.

In this institution, the duty now devolves upon us. In the various departments of business, and of care, we all have daily much to do with the inmates of the asylum. Some of us devote our whole time to this duty. It becomes us all seriously to consider *how* this duty shall be performed ; what discipline of feeling and what subjugation of temper there shall be with us, that we may ever administer the "LAW OF KINDNESS" to its full extent, and in its proper spirit.

When we accept a place in this asylum, we assume a responsibility which it should be our constant desire to fulfil to our own satisfaction and that of our employers ; it should be performed *conscientiously*, so as to be approbated by our MAKER, who will be strict to mark injustice or oppression to unfortunate and suffering fellow men.

No individual is worthy of a place in such an institution, who labors for wages only. *Duty, a desire to improve the condition of all within the sphere of our influence, to increase the happiness and lessen the sufferings of each and all the inmates, should be the governing motive of our daily conduct.* We must never forget that we are dealing with fellow creatures who, being deprived of reason, are not responsible for their conduct. The regulating power of moral action is withheld from them ; hence they are capricious, passionate, and often violent. They often also misjudge, and are led astray by perverted sense or by delusions of the understanding, which carry them far away from the proprieties of rational conduct. How exceedingly wicked and improper, therefore, to harbor a spirit of revenge, or to retaliate for injuries done us by such individuals !

It is because they are unable to control themselves, and because they will not readily acquiesce in the directions of their friends, that these individuals are placed in the asylum. From us they are to have every comfort and every indulgence, which individually or collectively, will promote their best good. To us they look for sympathy and counsel, for assistance in their various troubles and perplexities. We should enter deeply into their feelings, and show our willingness to spend our time and strength to promote their happiness, and recovery to health.

If we withhold what they may reasonably require, we do *them* injustice, and violate *our duty*. If we treat them with neglect, or with unkind and hasty language ; if in any way we tantalize them, or recriminate when they assail us with violent or abusive words, we may do them irreparable injury, for which we all ought to *feel*, and certainly shall be *held* responsible.

PERSUASION with a proper spirit, will generally be followed by a quiet acquiescence in all reasonable requirements. *Much depends upon the MANNER of our intercourse with the insane.* We should never be cold and insensible to their wants, never hasty and impatient in our in-

tercourse, never turn a deaf ear to their representations, never treat them with neglect, nor with feelings of superiority, but mingle with them in kindness, address them with respect and affection, and we shall secure their confidence, and gain their affections, both of which are necessary to their management.

II. DUTY OF RESIDENT OFFICERS.

No officer shall be directly or indirectly interested in any contract for the supply of any article for the use of the Asylum; nor shall he receive any present or gratuity from any person dealing with the Asylum, or from any patient or visitor, or from the friends of a patient.

THE SUPERINTENDENT.

1. The superintendent is literally the head of the establishment. He has the general superintendence of the buildings, grounds and farm, together with their furniture, fixtures and stock. To him are committed the charge of the patients, the ordinary disbursements of the institution, and the direction and control of all persons therein, subject to the regulations of the board of trustees. It shall be his duty, also, to determine, under the direction of the said board, what attendants and assistants are necessary to be employed, and to prescribe their respective places and duties; also to establish and enforce in every department systematic order and salutary discipline.

2. He shall visit all the patients *daily*, or as much oftener as may be necessary, (except cases where he may deem it injurious, and then he shall learn their condition daily,) and shall direct such medical, moral and physical treatment as may be best adapted to their relief; giving the fairest trial to kind and moral management.

3. He shall cause to be kept in a suitable book, a record of the name, sex, age, place of nativity and residence, civil state and profession of each patient; also, as far as can be ascertained, the dates and history of each patient's disease, the time when received, and when removed, and how, whether cured or relieved; whether eloped or dead; and if dead, the cause; together with all such other facts and circumstances in each case, as are useful or usual in the statistical records of such an institution. Also, a record, in chronological order of all applications for admission into the Asylum; with the principal facts of each case. Also, in another suitable book, records of the medical treatment of the patients, with daily remarks of symptoms and results. Also, a record of the names and residence of all persons employed in the institutions, with the times and terms of their respective engagements; also, the stipulated wages, and the nature of the services expected from each, and the times and causes of their dismissal.

4. He shall define, with clearness and precision, the kinds and degree of restraint which attendants may impose without his special directions; and he shall, every week, record in the case book of the Asylum, such restraints or personal coercion as he may have prescribed, during the week, and the reasons thereof, in each case, with notices of results.

5. At each monthly visit of the trustees, he shall exhibit all the records

of the institution, and inform them minutely of its affairs. Every quarter he shall give a brief written statement of its general condition ; the names of persons removed and received during the three months last past, with such suggestions and remarks as he may deem useful. At each annual meeting of the board, he shall present a *tabular view* of the institution for the year, with full and minute details from the records, and accompanying it with a condensed *report* of other interesting and useful facts and circumstances, experiments and opinions, illustrating its management, condition and prospects.

6. He shall, from time to time, give to all persons employed at the Asylum, or on the farm, such instructions as he shall judge best adapted to carry into full operation all its rules and regulations. He shall cause such rules and regulations, to be strictly, and faithfully executed ; taking care that the steward and matron, and all others employed about the premises, perform particularly and punctually, all their respective duties.

7. He shall go frequently into the halls at unexpected hours, and extensively over the establishment, occasionally, in the evening, exercising constantly and every where, a paternal vigilance and guardianship.

8. All moneys advanced for pay-patients, or otherwise collected or received by the superintendent, or by persons employed by him, shall be immediately paid over to the treasurer of the Asylum.

THE STEWARD.

1. The steward, under the superintendent's direction, shall purchase furniture, food, medicine, fuel, stoves and other necessary articles ; and he shall be accountable for their safe keeping, and for their economical use and expenditure.

2. He shall keep clear, methodical and exact accounts of all purchases, of all receipts and expenditures of money, and of all charges on account of any patients. He shall exhibit all his account books, and recent vouchers, to the trustees, at their first visit in each month ; and he shall furnish a quarterly abstract of the same, both to the treasurer and trustees, on the last days of March, June, September and December, in each year. Copies of all accounts which become due to the Institution, shall be furnished, to the treasurer, monthly ; and often-er at his request.

3. In the name of the superintendent, and by his direction in each case, and not otherwise, the steward shall hire attendants and assistants, and agree with them for their wages ; and by like direction he shall dismiss them when unfaithful, negligent, or incompetent ; he shall keep and settle their accounts ; and he shall perform such other duties in relation to the internal management and government of the Asylum as the superintendent shall require. He shall see that the attendants and assistants rise and begin business immediately after the ringing of the morning bell ; and that they retire at proper season at night. Throughout the day, he shall constantly observe their conduct, see that in all respects they do their duty, and report to the superintendent any instance of misconduct or negligence.

4. He shall receive visitors, give them all suitable information, and show them such parts of the buildings and grounds as are open for their examination.

5. He shall remain, as much as possible, in the wing appropriated to the male patients, so as to be much in their presence, to see that they are kindly treated, that their clothes are taken care of, that their food is properly served and distributed, and that they take the same in a proper manner; that the rooms, galleries, yards and other apartments under his care, are kept clean and in good order, and properly warmed and ventilated; and that the male attendants observe his orders and directions, and in all respects do their duty.

6. In all his directions to subordinate agents, in executing the details of the superintendent's plans, and in enforcing his rules, the steward shall be considered as carrying the authority of the superintendent. It is his duty to preserve order in the house, and faithfulness amongst assistants; and to see that the regulations here adopted shall be fully put in practice.

THE MATRON.

1. It shall be the duty of the matron to look carefully to the female patients, direct their labor and amusements, and spend as much time with them as her other duties will allow: she shall see that they are kindly treated in all respects; that their nurses and attendants are well instructed and faithful; that their food is properly served and distributed; that their apartments are clean, warm, and ventilated; and that their clothes and bedding are always clean, well aired and in good order.

2. She shall also superintend the kitchen and laundry, and see that the cooking, washing and ironing are properly done; frequently inspect every department, and have an eye to the neat, nice and tidy appearance of the whole house. It is expected that she will devote her whole time to the institution, and spare no effort to promote the comfort and recovery of its inmates. Her orders and regulations are to be implicitly obeyed.

THE ASSISTANT PHYSICIAN.

1. He shall be *ex-officio* the apothecary of the institution. He shall prepare and put up all medicine, see that all prescriptions are properly administered, and ascertain, as far as may be, the effects of the same. He shall superintend the cold, warm and shower baths; the warmth, cleanliness, and ventilation of the halls, and the exercise and amusements of the patients.

2. He shall accompany the superintendent on his regular morning visits, and see all the patients at least once each day; such of the males as are under medical treatment more frequently, if necessary. He will often visit the galleries, spend much of his time with the patients, study the peculiarities of each case, see that all are properly treated, (entering in a book, kept for that purpose, and reporting immediately to the superintendent, all instances of neglect or abuse,) and in

his intercourse with them, exert what moral influence he can, and endeavor to promote in every way, their comfort and recovery.

3. At the request of the superintendent, he shall keep the record of the cases, conduct the correspondence, copy letters, keep the accounts of the clothing of patients as they come in and leave the asylum, and perform all other services connected with the medical department.

4. He shall wait upon visitors, and show the premises when the steward is absent, or particularly engaged.

III. DUTY OF ATTENDANTS AND ASSISTANTS.

DUTY TO OFFICERS.

1. It is expected that every person employed in the asylum, will every where speak well of the institution, and treat the officers, on all occasions, with politeness and respect, and do, readily and cheerfully, all the duty which they require.

2. All must expect an unceasing observation of the manner of performing their respective duties; and the suggestions, by an officer, of deficiencies or improvements, are to be taken kindly, and without offence.

DUTY TO EACH OTHER AND TO THEMSELVES.

1. In the first place, self-respect is enjoined on all. Each one is responsible in his or her department, and should be ambitious to do the duties of it to entire acceptance.

2. Patients will look to attendants for *good* examples: let attendants be careful in nothing to set a *bad* one.

3. Let your dress always be neat and clean. Avoid all ungentlemanlike habits, such as men's wearing their hats within doors, going in shirt sleeves, &c. Never indulge in loud talking or laughing. Use no profane, obscene, or vulgar language. Never play at any game with one another, nor with patients, excepting at the superintendent's direction.

4. Treat each other with politeness: be civil, affable, cordial. Let a smile habitually light up your countenance when you speak. A calm, quiet, cheerful deportment befits your employment. Cherish a high sense of moral obligation; cultivate an humble, self-denying spirit; seek to be useful, and maintain, at all hazards, your purity, truth, sobriety, economy, faithfulness, and honesty.

5. No attendant or assistant, while connected with the asylum, shall, at any time, at home or abroad, make use of distilled spirits, or intoxicating liquor of any kind. Neither shall any tobacco be used, nor cigar or pipe be smoked about the premises.

DUTY OF ATTENDANTS TO PATIENTS.

1. The attendants are to treat the inmates with respect and attention; greet them cheerfully with "good morning" or "good evening," and such other marks of good will and kindness as evince interest and

sympathy. Under all circumstances, be tender and affectionate ; speak in a mild, persuasive tone of voice ; never address a patient coarsely, by a nickname, nor by a Christian name, nor by a surname, without the addition of *Mr., Mrs., or Miss.*

2. A patient is ever to be soothed and calmed when irritated ; encouraged and cheered when melancholy and depressed. They must never be pushed, collared, nor rudely handled. To induce them to move, gentle, persuasive measures will prevail in most cases ; when these fail, tell the superintendent, or, if he be absent, the apothecary or steward.

3. If the attendant receive insult and abusive language, he must keep cool, forbear to recriminate, to scold, threaten, or dictate in the language of authority. *Violent hands are never to be laid upon a patient, under any provocation. A blow is never to be returned, nor any other insult.* Sufficient force to prevent the patient's injuring himself, or others, is always to be applied gently. The attendant must maintain his authority by dignity of deportment, and never suffer himself to be looked out of countenance.

4. The attendant is never to apply any restraining apparatus, such as muff, mitts, &c. unless by order of a resident officer.

5. On rising in the morning, it is the duty of the attendants to see that each patient confided to his or her care is thoroughly washed, hair combed, clothes brushed, and cleaned if necessary, collars, wristbands, and suspenders buttoned, and all parts of the dress properly adjusted and secured, boots and shoes cleaned and tied ; and in fact that the whole dress be neat and in good repair. (All this should be re-looked to throughout the day ; and especially before coming to meals, or religious services, or going to ride or walk, when hats, &c. should be carefully re-brushed, &c.) The patients' beds are then to be made, and the galleries, day rooms, bathing rooms, passages and stairs to be swept, and the whole premises put in complete order as soon as it can be done ; so that a complete inspection may be had of the house by the superintendent, commencing at 8 o'clock from April to September, both inclusive, and at 9 the rest of the year. Previous to which time no patients are to leave the house to walk, labor or ride, without directions of the medical officer. By 10 o'clock, the morning work should be completed, and the house in order for visitors in every part.

6. One attendant must always be in each gallery with the patients, and he must not leave under any circumstances, but when relieved. The attendants must not retire to their rooms while the patients are in the halls. *This rule must be observed in all the galleries.*

7. At meals, one attendant must always be present to carve, to distribute food to those who are incompetent to do it for themselves, and to see that every one has a proper supply. He must be careful that no patient carry away a knife, fork or other article from the table.

8. An attendant must never place in the hands of a patient, or leave where a patient can get, any razor, penknife, rope, cord, medicine, or any dangerous weapon or article. A constant watch of patients is to be kept in these respects ; their beds frequently searched for such

articles, and the knives and forks counted after each meal. An attendant must never deliver any letter or writing from or to a patient, without permission of the superintendent; nor ever retain in his or her possession, without such permission, any writing of a patient.

9. The attendants in each gallery are responsible for the safe keeping of the patients therein, and must not leave them except in charge of some responsible person. There is an obvious impropriety in attendants sitting in their own rooms, engaged in reading or writing, during hours of duty; *i. e.* from the time the patients get up in the morning, until they retire at night. During this time they should be in their own rooms only long enough to adjust their own dress. All these hours, with this sole exception, should be devoted to the patients; endeavoring to keep them tidy and warm, to prevent improper conduct, bad postures, (such as lying on the ground, &c.) and to instruct, comfort and amuse them by talking with them, reading to them, and the like.

10. Suicides and elopements are most frequent about meal times, and at the hour of religious services; therefore, the strictest watch is to be kept at these times. Attendants must always be stationed in the hall, or where they can see patients during meals or religious services, and see that no one passes out of the house, and that each one returns to his or her apartment. Attendants are to look not merely to those under their immediate charge, but, with constant watchfulness, over all the patients, they must endeavor to prevent any from eloping or wandering. The clothes of suicidal patients should be removed from their rooms at night. Each attendant should always know where every one is of those committed to his or her charge.

11. When patients ride out, it is the duty of the driver of the carriage to see that they do not leave the carriage, nor communicate with persons casually met, nor deliver letters, packages or messages, nor procure weapons, tobacco, or other articles. He is not to stop and do errands for himself or others, without permission of the superintendent. When patients walk out with an attendant, he shall keep them together, and observe the same prohibitions as the driver; he shall also particularly avoid going near dangerous places, as precipices, rivers, wells, machinery, &c.

12. Attendants will go to the office for medicine half an hour before each meal, and see that the whole is given at the time directed, and that it is all swallowed. Each cup is marked with the patient's name. Extreme care must be taken to avoid mistakes, and to prevent patients helping themselves to medicine; therefore, all cups, vials, boxes, &c. containing medicine, should be kept locked up. Within an hour and a half from the time of taking them from the office, the cups should be cleaned and returned to the office. In going for the cups and returning them, the attendant must not delay in the passage, nor hold any other conversation than to report to the superintendent or apothecary, changes in the condition of the patients, which they are always to do most faithfully.

13. All damages by patients, and all their wants as to clothes and other articles necessary to put these rules in practice, are to be reported *daily* to the superintendent, steward or matron. It will be no

excuse for attendants that their rooms, bed and patients are not in ample order, to say *they have not what is necessary*; for their application for such articles should be unceasing until they get them.

14. The attendants must never ridicule the patients, nor mock or imitate them, nor do or say any thing to wound their feelings. If the patients engage in any controversy, or other improper or exciting topic of discourse, the attendant must, in the gentlest manner, interfere and check it: should other means fail, one or two of the loudest talkers may be shut up for a short time, in their respective rooms; if the quiet and good order of the apartment cannot otherwise be preserved. The conduct and conversation of patients must never be spoken of to visitors, nor reported by attendants when abroad.

15. Attendants must look particularly to the comfort of patients in their special charge, and visit them late at night and early in the morning. In speaking to patients of the officers, attendants should inculcate respect and confidence in their management, and carry into operation all directions and prescriptions, in the most ready and faithful manner.

16. *Every patient must be in the charge of some responsible individual at all times*, unless permitted to be at large by the superintendent. The person who takes a patient from one of the galleries, shall be accountable for his or her safe keeping until returned to the same, or entrusted by a resident officer to the care of another person.

17. No patient shall be permitted to go out of the building in which his or her room is situated without the consent of a resident officer; and no *new* patient without an order of the superintendent.

18. Food is not to be carried to the rooms of the patients; nor is any one to be absent from the regular meals (excepting in case of sickness or high excitement) without permission of a resident officer.

DUTY TO THE INSTITUTION.

1. The attendants and assistants must never leave the asylum without permission from a resident officer, and always return by nine o'clock in the evening, unless leave be expressly given to stay longer. Application for leave of absence should be made several hours before leaving.

2. The attendants must never give up the key of the passages, nor let any person into the halls without permission of a resident officer. No male attendant, without such permission, shall enter a female apartment. The attendants of the lodges must never admit any person to those apartments, except the officers and those whom the officers designate.

3. It is expected that all persons will fulfil their engagements scrupulously, as to time of service and duty to be performed, agreeably to their respective contracts with the steward; and no one shall discontinue service at the asylum, or on the farm, without giving at least thirty days' notice, in writing, to the superintendent or steward.

4. No company shall be admitted into the rooms or galleries occupied by the patients at any time, except by express permission of the

superintendent; but all other parts of the asylum and its grounds may be exhibited by the steward, apothecary or matron. All persons employed by the institution are expected to show marked respect and attention to strangers and visitors.

5. An indispensable duty of the attendants and assistants, is to secure the perfect and systematic cleanness and neatness of the asylum and its inmates. *No part of the house is to be considered clean when it can be made cleaner.* Let every thing about the establishment, illustrate the good old adage, "*It is as easy to be nice as nasty, and a great deal more comfortable.*" The spit-boxes, stoves, grates, hearths, floors, tables, bed and bedding, cellars, closets and butteries are to be scrupulously attended to *every day*; so as to preserve a pure atmosphere. Chamber vessels are always to be covered when removed. Any offensive odor is evidence of neglect. Particular attention must be paid by the attendants to the water closets, rinsing the pans thoroughly after use, and carefully closing the lid, so that no patient can meddle with the same.

6. The attendants must look well to all doors connected with the galleries at bed time; see that the patients' doors are all safely locked, and the doors communicating with the centre building, all fast bolted; also, take care of all fires and lights, each attendant keeping a light in a lantern, burning all night, in his room, or in the adjoining entry. Visiting from gallery to gallery, and especially to the kitchen without business, is a violation of duty. All the doors of the patients' rooms shall be kept locked, while the patients are in bed. Attendants must never give their keys to any person but an officer, without special direction in each case. In locking doors, be careful always *to hear the bolt slip*: this precaution will often prevent escapes.

7. The whole time of the attendants and assistants belongs to the asylum. This does not prohibit each one from attending to his or her own clothing: but to no other service can they devote any time, nor can they receive any compensation, besides their regular wages for any service or labor, excepting only by express permission of the superintendent in each case.

8. Any attendant or assistant receiving any present or gratuity from any patient (or the friend of a patient) in the asylum, or from any visitor; or selling any thing to a patient; or making any perquisite, of any kind whatever, shall be instantly dismissed.

IV. STATED HOURS FOR MEALS, &c.

1. The morning bell shall be rung for two or three minutes, through the hall of the second story, at 5 o'clock A. M., in May, June, July and August; at half past 5, in March, April, September and October; and at 6, in November, December, January and February. It is required that all persons who have duty to perform in the institution will rise, in the morning, at the ringing of the bell.

2. Breakfast is always to be placed upon the table precisely one hour and a half after the ringing of the bell; *i. e.* in the summer at half past 6 o'clock, in the spring and fall at 7, and in winter at half past 7. Din-

ner will be served uniformly at half past 12 M., and tea at 6 P. M., the year round.

3. Family prayers every evening, at half past 5 o'clock ; for those of the patients only who have *permission* from the superintendent ; and those of the attendants and assistants who can be spared from the duties of the establishment.

4. The asylum is to be closed at half past 9 o'clock every night ; at which time the attendants and assistants must all retire to their apartments.

5. Sunday is to be a *Sabbath*, or day of rest and quiet, at the asylum. The buildings and grounds are not to be exhibited to visitors on this day ; nor shall any visiter be admitted into the galleries or rooms of patients or attendants.

6. It is expected that all persons employed in the asylum, who are well, and can be spared from the duties of the house and halls, will, unless leave of absence be granted in each case, attend public worship in the chapel, on the Sabbath, morning and evening.

V. PREMIUM FOR FIDELITY.

The superintendent is authorized, at his discretion, to allow, annually, to each attendant and assistant, who shall have served one year, at least, in the asylum, TO HIS ENTIRE SATISFACTION, a gratuity, not exceeding \$8 to a male, and \$5 to a female.

VI. INCURABLE DEPARTMENT.

It shall be the duty of the overseers of the incurable department, under direction of the officers, to prepare food for the patients in their wing ; to keep the fires warming the wing, or see that they are kept ; to look to the attendants who have charge of the galleries of the wing ; to see to the clothing and bedding ; that the halls are properly warmed and ventilated ; that the inmates are comfortable and kindly treated.

They will also prepare and serve the food for such attendants and assistants as the officers shall direct.

For these purposes it is expected that they will visit the galleries occasionally, especially in the evening, before or after locking up the rooms.

It shall be the duty of the overseers of this department to take care of all stores sent into the department ; to see to the order and cleanliness of the whole, that the doors are closed at night, fires extinguished and secured, lamps put out, &c. ; to see that all the help rise and commence duty at corresponding hours with those of the main hospital. All disorderly conduct, or neglect of duty of those employed in the wing shall be forthwith reported to the superintendent. In all respects the overseers of this department shall be governed by the general rules and regulations of the asylum.

VII. WATCHMAN.

It shall be the duty of the watchman to commence his services each night at half past nine o'clock.

In *winter*, when the weather is cold, he will keep a fire in at least one furnace of each wing, and in the centre building, during the night, in which case he will visit them at least every hour, and regulate the fires according to the temperature of the weather. In moderate weather the fires may be suffered to go out, in which case the damper must always be closed.

The least suspicion of fire in any part of the establishment must excite his immediate vigilance.

If fire is discovered, he must forthwith notify the superintendent, the steward, and assistant physician, and all attendants and assistants, but give no general alarm. It will be his duty to pass out into the rear of the asylum frequently, and in extremely cold weather look at the fires under the lodges. If the fires in the furnace are suffered to go out, he must kindle them in the morning, so as to have them in operation by five o'clock.

At all seasons he must have all fires built which are necessary, as in the wash room, centre kitchen, &c. before he rings the bell.

It will be his duty to look frequently about the wings, and in summer to walk about the establishment, to see that all is safe. He must also look frequently into the male infirmary, when there are sick persons in it, and keep up a uniform fire, when necessary. During the whole night, whether stationary, or moving, he will have his lights always in a lantern, and never, in any case, or under any circumstances, deviate from this rule.

In summer he will spend much time walking about the building, and be frequently in the infirmary, when it is occupied by the sick.

After ringing the bell in the morning, his duty ceases till time of dinner. After dinner his services will belong to the institution till sunset, when he will be released till half past nine.

In his walks he must be as silent as possible, enter into no loud conversation with any one, and make as little noise as possible.

He must not fail to be faithful; keep awake during the hours of his watch, and never cease to be vigilant.

VIII. VISITERS.

Strangers and others may be admitted, upon a ticket, signed by a trustee, to visit the buildings and grounds, with such restrictions as the superintendent may prescribe, between the hours of 10 o'clock and 12 M., or 2 and 4 P. M. daily, except Sundays.

(B.)

Table showing the number of Insane and Idiots in the United States, according to the census of 1840.

STATES.	WHITES.		COLORED.		Total.	Population.	Ratio of Insane to Population.
	Public.	Private.	Public.	Private.			
Maine,.....	207	330	56	38	631	501,793	1 to 795
New-Hampshire,.....	180	306	8	11	505	284,574	1 " 563
Massachusetts,.....	471	600	27	173	1,271	737,699	1 " 580
Rhode-Island,.....	117	86	8	5	216	108,830	1 " 503
Connecticut,.....	114	384	20	24	542	309,978	1 " 572
Vermont,.....	144	254	9	4	411	291,948	1 " 710
New-York,.....	683	1,463	138	56	2,340	2,428,921	1 " 1,038
New-Jersey,.....	144	225	46	27	442	373,306	1 " 845
Pennsylvania,.....	469	1,477	132	55	2,133	1,724,033	1 " 808
Delaware,.....	22	30	21	7	80	78,085	1 " 976
Maryland,.....	138	254	99	42	528	469,232	1 " 889
Virginia,.....	317	731	326	58	1,432	1,239,797	1 " 866
North Carolina,.....	152	428	192	29	801	753,419	1 " 941
South Carolina,.....	91	285	121	16	513	594,398	1 " 1,158
Georgia,.....	51	243	108	26	428	691,392	1 " 1,615
Alabama,.....	39	193	100	25	357	590,756	1 " 1,655
Mississippi,.....	14	102	66	16	198	375,651	1 " 1,897
Louisiana,.....	6	49	38	7	100	352,411	1 " 3,524
Tennessee,.....	103	596	124	28	851	829,210	1 " 974

B.—(CONTINUED.)

COUNTIES.	WHITES.		COLORED.		Total.	Population.	Ratio of Insane to Population.
	Public.	Private.	Public.	Private.			
Kentucky,.....	305	490	132	48	975	779,828	1 "
Ohio,.....	363	832	103	62	1,360	1,519,467	1 "
Indiana,.....	110	377	47	28	562	685,866	1 "
Illinois,.....	36	177	65	14	292	476,183	1 "
Missouri,.....	42	160	50	18	270	383,702	1 "
Arkansas,.....	9	36	13	8	66	97,574	1 "
Michigan,.....	2	37	21	5	65	212,267	1 "
Florida,.....	1	9	12	.....	22	54,477	1 "
Wisconsin,.....	1	7	3	.....	11	30,945	1 "
Iowa,.....	2	5	4	.....	11	43,112	1 "
District of Columbia,.....	1	13	4	3	21	43,712	1 "
Navy of United States,.....	.....	.....	.....	.....	.....	6,100	.....
Totals,.....	4,329	10,179	2,093	833	17,434	.....	.....
Aggregate population of the United States,.....	.....				.....	17,068,666	1 to 979

(C.)

Lunatics and Idiots in the State of New-York, by counties, according to the United States census of 1840.

COUNTIES.	WHITES.		COLORED.		TOTAL.	
	At public charge.	At private charge.	At public charge.	At private charge.	At public charge.	At private charge.
Albany, .....	.....	14	1	2	1	16
Allegany,	10	10	.....	.....	10	10
Broome,	9	6	.....	.....	9	6
Cattaraugus,	8	20	.....	3	8	23
Cayuga,	11	40	.....	6	11	46
Chautauque,	7	36	1	7	8	43
Chemung,	1	11	.....	1	1	12
Chenango,	19	31	.....	.....	19	31
Clinton, .....	.....	4	.....	.....	.....	4
Columbia,	18	82	2	4	20	86
Cortland,	6	20	.....	1	6	21
Delaware,	13	36	1	.....	14	36
Dutchess,	23	27	6	1	29	28
Erie,	6	34	1	4	7	38
Essex,	3	29	.....	2	3	31
Franklin,	6	4	1	.....	7	4
Fulton,	1	17	.....	.....	1	17
Genesee,	12	30	1	1	13	31
Greene,	9	20	.....	.....	9	20
Hamilton, .....	.....	.....	.....	.....	.....	.....
Herkimer,	10	66	2	1	12	67
Jefferson,	13	32	2	5	15	37
Kings,	19	15	.....	1	19	16
Lewis,	3	28	.....	1	3	29
Livingston,	5	39	1	.....	6	39
Madison,	14	39	.....	3	14	42
Monroe,	20	21	2	3	22	24
Montgomery,	1	18	2	13	3	31
New-York,	120	67	5	9	125	76
Niagara,	6	13	.....	.....	6	13
Oneida,	17	102	.....	2	17	104
Onondaga,	24	47	1	.....	25	47
Ontario,	11	35	.....	.....	11	35
Orange,	31	18	1	4	32	22

C.—(CONTINUED)

COUNTIES.	WHITES.		COLORED.		Total.	
	At public charge.	At private charge.	At public charge.	At private charge.	At public charge.	At private charge.
Orleans,	8	10	4	4	12	14
Oswego,	2	5	.....	1	2	6
Otsego,	32	43	.....	2	32	45
Putnam,	3	13	.....	.....	3	13
Queens,	15	17	.....	.....	15	17
Rensselaer,	13	26	.....	1	13	27
Richmond, .....	.....	1	.....	.....	.....	1
Rockland, .....	.....	1	.....	3	.....	1
Saratoga,	19	24	1	8	20	32
Schenectady, .....	.....	6	.....	2	.....	8
Schoharie,	3	18	.....	.....	3	18
Seneca,	2	8	7	1	9	9
St. Lawrence,	14	29	.....	5	14	34
Steuben,	11	13	1	1	12	14
Suffolk,	8	18	5	7	13	25
Sullivan,	8	11	.....	.....	8	11
Tioga,	2	22	2	6	4	28
Tompkins,	2	24	4	8	6	32
Ulster,	7	22	1	2	8	24
Warren,	1	1	.....	2	1	3
Washington,	22	39	.....	9	22	48
Wayne,	4	56	.....	1	4	57
Westchester,	44	37	1	1	45	38
Yates,	7	8	.....	.....	7	8
Total,	683	1,463	56	138	739	1,601

(D.)

*Lunatics and Idiots in the several counties of the State of New-York,
according to State census of 1835.*

COUNTIES.	IDIOTS.			LUNATICS.			
	Supported by public.	Supported by self.	Total.	Supported at public exp'e.	Supported by self.	Confined.	Total.
Albany,	34	13	53	30	10	1	42
Allegany,	10	15	37	8	1	2	10
Broome,	5	3	9	2	-----	-----	6
Cattaraugus,	7	1	18	5	2	-----	9
Cayuga,	12	15	53	3	8	-----	16
Chautauque,	9	3	22	5	2	-----	17
Chenango,	14	17	36	9	5	-----	19
Clinton,	6	4	11	4	4	-----	10
Columbia,	7	18	34	10	4	*35	61
Cortland,	5	14	23	1	1	-----	10
Delaware,	13	18	34	4	8	-----	18
Dutchess,	5	24	33	12	8	-----	22
Erie,	8	4	32	10	3	-----	16
Essex,	10	7	20	6	4	-----	10
Franklin,	2	1	9	6	4	-----	10
Genesee,	14	6	29	6	9	1	20
Greene,	14	12	30	12	9	1	27
Herkimer,	12	5	35	8	13	-----	28
Jefferson,	5	14	29	3	10	-----	25
Kings,	-----	7	7	-----	1	-----	3
Lewis,	3	-----	4	1	4	-----	6
Livingston,	13	2	19	8	4	2	14
Madison,	5	8	15	4	9	1	14
Monroe,	9	13	28	7	2	-----	9
Montgomery,	43	12	†64	11	5	-----	17
New-York,	7	21	34	10	21	3	176
Niagara,	5	4	15	4	-----	-----	4
Oneida,	16	14	47	22	13	-----	39
Onondaga,	9	23	43	8	8	3	20
Ontario,	9	9	39	5	2	-----	10

* 24 of these in the town of Glen.

† 29 of these in Hudson Lunatic Asylum.

D.—(CONTINUED.)

COUNTIES.	IDIOTS.			LUNATICS.			
	Supported by public.	Supported by self.	Total.	Supported at public exp'e.	Supported by self.	Confined.	Total.
Orange,	9	11	27	25	10	.....	43
Orleans,	6	6	15	2	1	3	6
Oswego,	4	9	28	.....	5	.....	10
Otsego,	32	28	68	21	14	.....	37
Putnam, .....	.....	2	18	.....	.....	.....	6
Queens,	11	7	20	1	2	.....	6
Rensselaer,	12	6	29	15	9	.....	30
Richmond,	2	.....	8	1	2	.....	5
Rockland,	2	1	7	2	.....	.....	2
Saratoga,	6	16	35	7	12	1	18
Schenectady,	15	5	21	2	4	.....	6
Schoharie,	7	1	25	.....	2	2	12
Seneca,	1	9	16	1	6	.....	9
St. Lawrence,	9	16	25	10	5	.....	16
Steuben,	8	23	44	9	12	3	23
Suffolk,	13	19	32	12	12	.....	24
Sullivan,	2	6	11	2	1	.....	3
Tioga, .....	.....	11	20	4	4	.....	11
Tompkins,	11	4	27	7	5	.....	13
Ulster,	*20	21	47	11	5	.....	19
Warren,	2	.....	2	4	.....	.....	4
Washington,	4	6	36	13	13	.....	39
Wayne,	3	11	21	3	6	1	12
Westchester,	9	11	22	1	5	.....	10
Yates,	7	10	21	5	2	.....	10
Total,	508	546	1,487	382	311	59	1,062

* 8 of these in poor-house.

(E.)

A STATEMENT

Showing the number of lunatic paupers confined in the poor-houses, jails, and other places, maintained at the expense of the counties, with the cost of their support, &c. as ascertained from the returns of the county clerks, December, 1841.

COUNTIES.	In poor-house.		In jail.		In private families at co. expense.		In Blomington Asylum.		Expense of keeping in poor-house.	Expense of keeping in jails.	Expense of keeping in private families.	Expense of keeping in Blomington Asylum.	Total number.	Average weekly expense.	REMARKS.
	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.							
Albany,.....	10	17	—	—	—	—	—	—	\$0 37½	—	—	—	27	\$0 37½	In addition to these there are 11 idiots—1 male, 10 females.
Allegany,.....	—	5	—	—	—	—	—	—	0 40	—	—	—	5	0 40	
Cattaraugus,.....	2	3	—	—	—	—	—	—	0 75	—	—	—	5	0 75	
Chautauque,.....	2	6	—	—	—	—	—	—	1 12	—	—	—	8	1 12	The one in a private family is partly supported by her friends.
Chenango,.....	3	4	—	—	—	—	—	—	0 62	—	—	—	7	0 62	
Cayuga,.....	4	3	3	—	—	—	—	—	0 51	\$1 75	—	—	10	0 88½	
Cortland,.....	4	3	—	—	—	1	—	—	1 54	—	—	—	7	1 39½	
Chemung,.....	1	5	—	—	—	—	—	—	0 98	—	\$0 50	—	2	0 98	
Delaware,.....	3	4	—	—	—	—	—	—	0 50	—	0 98	—	7	0 50	
Erie,.....	2	4	—	—	1	1	2	1	—	—	2 00	\$3 50	11	—	2 in the Hudson Lunatic Asylum.
Essex,.....	—	4	—	—	—	—	—	—	—	—	—	—	4	0 51½	
Genesee,.....	3	—	—	—	—	—	—	—	0 55	—	—	—	3	0 55	
Greene,.....	1	4	—	—	—	—	—	—	1 75	—	—	—	5	1 75	
Herkimer,.....	2	3	—	—	—	—	—	—	1 25	—	—	—	7	—	
Jefferson,.....	4	2	—	—	—	—	—	—	0 78	—	—	—	6	0 78	330 lunatic paupers, 305 in Blackwell's Island Asylum, and 25 mild cases in Bellevue almshouse.
Kings,.....	10	10	1	—	1	1	—	—	1 25	2 18	3 00	—	23	1 44	
Livingston,.....	1	2	—	—	—	—	—	—	—	—	—	—	3	—	
New-York,.....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Niagara,.....	2	2	—	—	—	—	—	—	1 50	—	—	—	4	1 50	
Oneida,.....	8	9	—	—	1	2	—	—	0 68	—	—	—	20	—	
Otsego,.....	4	9	—	—	2	—	1	1	0 42	—	1 00	3 50	17	0 85	

E.—(CONTINUED.)

COUNTIES.	In poor-house.		In jail.		In private families at county expense.		In Bloomingdale Asylum.		Expense of keeping in poor-house.	Expense of keeping in jails.	Expense of keeping in private families.	Expense of keeping in Bloomingdale Asylum.	Total number.	Average weekly expense.	REMARKS.
	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.							
Oswego,	1	1	1	1	1	1	1	1	\$0 56	---	---	---	1	\$0 56	None supported at county expense.
Orleans,	1	1	1	1	1	1	1	1	0 52	---	---	---	2	0 52	
Putnam,	6	5	1	1	1	1	1	1	---	---	---	---	12	---	
Rensselaer,	8	7	1	1	1	1	1	1	0 87½	\$2 00	\$1 25	---	18	1 01	In addition to these there are two idiots.
Saratoga,	4	7	---	---	---	---	---	---	0 84	---	---	---	11	0 84	
St. Lawrence,	1	---	---	---	---	---	---	---	---	---	---	---	1	---	
Suffolk,	---	---	---	---	---	---	---	---	---	---	---	---	---	---	
Tioga,	1	1	---	---	2	---	1	1	2 50	---	1 06	\$3 50	4	2 03	This one is confined in the town poor house, and there are more in the county confined in the town poor houses, but the clerk says it would be attended with too much trouble to ascertain their number in that extensive county.
Tompkins,	2	---	---	---	---	---	---	---	---	---	---	---	2	---	
Warren,	1	1	---	---	1	---	---	---	---	---	0 75	---	3	---	
Washington,	7	7	1	---	---	---	---	---	1 00	---	0 77	---	15	0 98	
Wayne,	3	4	---	---	---	---	---	---	1 00	---	---	---	7	1 00	
Wyoming,	1	3	---	---	2	---	---	---	0 46	---	0 50	---	6	0 47	
Total,	97	133	6	---	8	11	3	3	---	---	---	---	263	\$0 85.3-5	

(F.)

Estimated number of lunatic paupers in the counties which have made no returns ; allowing one lunatic pauper to every 4,868 inhabitants. December, 1841 :

Broome,	4
Clinton,	6
Columbia,	9
Dutchess,	11
Fulton and Hamilton,	4
Franklin,	3
Lewis,	3
Madison,	8
Monroe,	13
Montgomery,	7
Onondaga,	14
Orange,	10
Ontario,	9
Queens,	6
Rockland,	2
Richmond,	2
Schoharie,	7
Suffolk,*	6
Seneca,	5
Sullivan,	3
Steuben,	9
Schenectady,	3
Ulster,	9
Westchester,	10
Yates,	4
<hr/>	
Total,	167
<hr/>	

the following counties, included above, have sent in returns since the foregoing table was made out:

Monroe,	12	weekly expense,	52	cents.
Seneca,	7	"	84	3-10 "
Ontario,	4	"	57	4-10 "
Onondaga,	9	"	63	"

* In addition to the one reported by the county clerk.

(G.)

*Specification of the plans of the New-York State Lunatic Asylum,
at Utica.*

The whole to consist of four buildings of three stories and a basement each; the principal front to have the main building carried up an additional story; to be located at right angles to each other, facing outward, and to be connected by verandahs of open lattice work; the whole enclosing an octagonal area.

The foundations to be of rough mason work; the basements above the ground, of hammered stone; water table, window and door sills, and columns to be of cut stone; window and door caps and door steps of the same material. Partition walls to be of brick, and to contain flues for ventilators; outer walls of hammered stone. The roofs to be covered with tin plate.

The principal front to consist of a main building four stories high above the basement, forty-six by one hundred and twenty feet. The basement to be occupied by the various offices necessary for washing and cooking for the officers and attendants in the institution, and their families, and for the patients; to be divided through the centre by halls of ten and twelve feet wide, crossing each other at right angles. This arrangement of halls to be the same in the first, second and third stories. The first floor to contain a dining room and a drawing room in front, one on each side of the grand entrance hall, fifteen by thirty-two feet each; the corners in front, intended, the one for the physician's, and the other for the warden's office, each fifteen by eighteen feet; in rear, dining rooms for patients, one on each side of the main hall, each fifteen by thirty-seven feet; stairs and dumb waiters occupying the remainder. The second floor in all respects the same as the first, except that the space over the dining room and drawing room in front is divided into bed chambers. The third floor precisely like the second. The fourth floor to have a chapel, thirty-six by ninety-three feet, in the centre of the building; the remainder of thirteen feet on each side, extending through the whole depth of the building, to consist of halls and stairs. A verandah of iron sash, supported by piers of stone, in rear of the main building, with lateral openings into the centre wings, one to each floor from the first to the third, both inclusive, each twenty by eighty-eight feet. A doric portico, with a pediment at the elevation of the main roof, supported by six columns. Centre wings extending on each side from main buildings, one hundred and sixty feet deep, to side wings at the extremities. The basement intended for fire rooms, pump rooms, wells, cisterns, and store rooms for wood, coal and vegetables, and for wards for disorderly patients. The first floor having in each centre wing, a room for attendants, two bath rooms and two water closets. Thirty-five rooms for patients in each wing, nine and a

half by ten feet each ; two separate and distinct staircases to each wing, and a hall thirteen feet wide and two hundred and twenty-three feet long, from the extremity of end wings, through the centre wings into the verandah in rear of the main building. End wings forty-four feet front by fifty-five feet deep ; the first floor of each end wing having one room of double size for patients, one stairway, one room for attendants and two patients' rooms, each twelve by twenty-five feet, communicating with each other by folding doors. The second and third floors of the centre and end wings are, on account of the brick partition walls, essentially the same as the first.

The other three buildings are to be, in all their material parts and arrangements, the same as the principal front, with the exception of the fourth story and the portico of the main buildings, which will be omitted. One of the wings to be fitted up for a hospital for the sick, and another for the worst class of patients. Each room to have a ventilator, to be carried out of the roof ; and the whole to be warmed by heated air from furnaces in the basement, and conveyed into the halls of the different stories by means of tubes in the walls, opening into the halls by slides and dampers. A steam engine to be placed in the basement of the centre, for the purposes of forcing water into tanks in the attics of the wings, heating water for warm baths, &c. &c. Water closets and sewers to have all the modern improvements. The whole intended for the accommodation of one thousand persons, including officers and attendants.

NOTE, by Commissioners, Jan. 6, 1842.

The main building contemplated to be erected by the foregoing specifications, is now nearly ready for occupation. The foundation of the other three buildings have been laid ; one has progressed to a point ready to receive the water table, and the other two are raised upwards of a foot above the level of the ground. The whole three are covered and protected from the weather, all work upon them having been suspended by an act of the Legislature, passed May 1st, 1839. Nothing now remains to put the first in operation, but the passage of the necessary laws for its organization, and an appropriation to furnish the building.

(H.)

*Utica, December 25, 1841.**To the Trustees of the State Lunatic Asylum.*

GENTLEMEN :

As the time approaches for making your report to the Legislature, we deem it proper to apprise you of the fact that an additional appropriation will be needed for the procurement of the necessary furniture for the entire building. At the last session of the Legislature an appropriation of seventy-five thousand dollars was made for the completion and furnishing the building, but the act directed that the building should be first completed. The estimated expense of finishing was less about \$800 than the \$75,000 thus appropriated, and in that estimate the tier of rooms upon the one side in the attic, which have been finished, were not included in the estimate, and other things remain to be done, which were not then estimated, or thought of, and we are of the opinion that very little, if any, of that appropriation will be left for the purchase of furniture, after the entire completion of the building.

Respectfully,

Your obedient serv'ts,

T. J. FAXTON,

WILLITTE H. SHEARMAN.

Commissioners of State Lunatic Asylum.

(I.)

Estimate of Furniture required for the New-York State Lunatic Asylum, December, 1841.

CENTRE.

600 yards hall floor cloth, at \$2,.....	\$1,200 00
600 " parlor and bed room carpeting at \$1,.....	600 00
	<hr/> \$1,800 00

For 2 Parlors.

2 mirrors, \$14,.....	\$28 00
6 tables, \$25,.....	150 00
2 mahogany secretarys and book cases, \$70,....	140 00
36 curled maple chairs, \$3,.....	108 00
	<hr/> 426 00

For 1 private dining room.

1 mahogany extension dining table,.....	\$50 00
24 chairs, \$1.50,.....	36 00
1 mirror,.....	10 00
1 cherry table,.....	6 00
	<hr/> 102 00

For Superintendent's office.

1 cherry table,.....	\$6 00
20 chairs, \$2,.....	40 00
	<hr/> 46 00
12 fire setts, at \$10 00,.....	120 00

Furniture for 17 lodging rooms.

1 dressing table, 1 looking glass, 1 double wash stand, and 6 chairs for each, at \$27,.....	\$459 00
17 bureaus, \$15,.....	255 00
17 French screw-bedsteads, \$3.75,.....	55 25
17 hair mattresses, 40 lbs. to each—680 lbs. at 50 cts. per lb.....	340 00
17 live geese feather bolsters, 5 lb. each—85 lbs. at 50 cts. per lb,.....	42 50
17 pair rose blankets, \$7,.....	119 00
34 counterpanes, \$5,.....	170 00
34 pair linen sheets, \$5,.....	170 00
34 " cotton " \$1.75,.....	59 50
34 " linen pillow cases, 1.25,.....	42 50
34 " cotton " " 56½ cts.....	19 13
34 live geese feather pillows, 68 lbs. 50 cts.....	34 00
30 comfortables, \$2.50,.....	75 00
	<hr/> 1,840 88
	<hr/> \$4,334 88
	<hr/> <hr/>

WINGS.

100 iron bedsteads, at \$7,.....	\$700 00
200 French single bedsteads, \$2.50,.....	500 00
300 patent cedar stuff or hair mattresses, 20 lb. to each—6000 lbs. at 25 cts. for cedar, or 50 cts. for hair; we estimate the latter.....	3,000 00
300 point blankets, \$1,.....	300 00
300 comfortables, \$1.50,.....	450 00
600 calico quilts, \$2.50,.....	1,500 00
600 pillows, \$1,.....	600 00
600 pair cotton sheets, 87 cts.	522 00
600 pillow cases, 37½ cts.	450 00
300 chairs, 50 cts.	150 00
18 bureaus for rooms in end wings, \$15,.....	270 00
600 yards carpeting, 75 cts.	450 00
	<hr/> \$8,892 00

For the entire establishment.

Crockery estimated on the requirements of 400 persons,.....	\$450 00
Hardware,.....	600 00
Tea and coffee urns, tea and table spoons,	800 00
Kitchen furniture, cooking utensils, stoves, pipe, and other articles not enumerated,.....	1,000 00
	<hr/> 2,850 00

Recapitulation.

Furniture for centre,.....	\$4,334 88
“ “ wings,.....	8,892 00
“ “ dining rooms, kitchens, &c. &c.	2,850 00
	<hr/> \$16,076 88

NOTE.—The items in the foregoing estimate are according to the best information in the hands of the commissioners. The superintendent will be the proper person to select the furniture required; our object has been to arrive at the aggregate amount as near as may be. We may have estimated some articles too high, or some too low; many are doubtless omitted, and some of the articles included in our estimate are perhaps not needed at all.

APPENDIX.

No. I.—Description of Asylums in United States.

A brief outline of the several asylums for the insane in the United States, mentioned in this appendix, will show the change of treatment of the patients in them, within the last few years, and the progressive improvement which has been effected by adopting a more rational system; and may extend the information of those who have devoted but little attention to the subject. The accompanying documents will illustrate also the modern mode of moral treatment, by examples adduced from numerous asylums, and demonstrate its utility when combined with other remedial agents, upon the patients subjected to its influence. The fact that more than *ninety* per cent of cases *known to be recent*, have been cured under the present mode of treating insanity, is in strong contrast with the former practices, when not over half that proportion were cured.

The institutions for the insane in the United States may be properly arranged into four classes, viz:

I. State Institutions.

II. City institutions.

III. Corporate institutions, or institutions formed by private subscriptions and under the care of a board of managers.

IV. Private institutions, or such as have been founded by one or more individuals.

Each of these classes has its advocates; and all have adopted the improvements of modern treatment, to the extent of their means.

I.—STATE INSTITUTIONS.

1.—*State of Maine.*

Maine has an insane hospital at Augusta, with a farm of 70 acres of land attached. The edifices, pleasantly situated on the eastern bank of the Kennebec river, are a central building and two wings, and will accommodate 220 patients. It is under the superintendence of Doct. CYRUS KNAPP. Though a State institution, yet two benevolent individuals contributed ten thousand dollars each towards its foundation. From the time it was opened, on the 14th October, 1840, to the close of that year, a period of only $2\frac{1}{2}$ months, 30 patients were admitted;

22 men and 8 women : 22 were cases of more, and 8 of less, than one year's duration. Evening prayers are held daily, and attended by most of the patients ; religious exercises on the Sabbath are statedly observed. Many of the male patients are occupied in cutting wood and various other kinds of labor. Many of both sexes are fond of reading and engaging in other amusements.

2.—*State of New-Hampshire.*

A State lunatic asylum is located at Concord. Though the benevolent enterprise of ameliorating the condition of the insane, and ultimately restoring them to reason, has but just commenced in this State, yet the prompt appropriations by the Legislature, and the spirit with which it is conducted, are worthy of commendation, and exhibit a zeal regulated by intelligence, which will insure success. This institution is under the superintendence of Doct. GEORGE CHANDLER.

3.—*State of Vermont.*

The "*Vermont Asylum for the Insane*," at Brattleboro', was opened on the 12th December, 1836. Its location is pleasant, in the midst of mountain air and fine scenery ; the edifices are a centre building and two wings extending 177 feet, with a southern exposure. The centre building has a basement and attic, and three principal stories. In the attic is a chapel for religious worship. The whole will now accommodate about 130 patients. A farm of 50 acres is attached to the institution, and altogether its appearance is that of a spacious, tasteful private residence. Within seven months from the time it was opened, it was filled with inmates ; and thirteen applications had to be rejected for want of room. The main building was erected for the residence of a private gentleman, and subsequently purchased by the State ; the cost, with recent improvements, amounts to about \$20,000. They have now 97 patients ; 53 females and 44 males, of whom 31 are from the *State of New-York*. During the year ending October 1st, 1840, there were admitted 239 patients, and there were 11 deaths. Religious exercises are regularly performed, and have been attended with salutary consequences. Those of the male patients whose condition will permit, are employed in manual labour on the premises. The women are engaged in needlework and domestic duties. The patients are furnished with the means of diversion and relaxation ; in walking, riding, fishing, reading, writing, drawing, painting, playing on the piano, and at games of various kinds. Though this is a State institution, its original founder was Mrs. ANN MARSH, late of New-Hampshire, who by her last will gave \$10,000 for the purpose of establishing such asylum. The institution is under the care of Doctor WM. H. ROCKWELL, as superintendent, to whose communication, herewith submitted, the trustees refer for further details.

4.—*State of Massachusetts.*

The "State Lunatic Hospital" is situated near the heart of the State, at Worcester, 40 miles from Boston. It is on an eminence, in full view of the magnificent amphitheatre of cultivated and ornamented grounds overlooking the beautiful and flourishing village of Worcester. It was opened for the reception of patients on the 19th January, 1833. The buildings are sufficiently extensive to accommodate 240 patients. It has a farm of 65 acres of land. The whole cost over \$100,000. The number of patients admitted, from its organization to the 18th September, 1841, was 1,321. There were, during the same period, discharged, 1,084; died, 98; recovered, 568. From January, 1833, to 30th November, 1840, there were 637 males, and 550 females admitted; 463 males, and 418 females discharged; 54 males and 36 females died; 247 males and 259 females recovered. The average number in the hospital in 1833, was 107; in 1834, was 117; in 1835, was 120; in 1836, was 127; in 1837, was 163; in 1838, was 211; in 1839, was 223; and in 1840, was 229. Hence it may be seen that the average number of patients has annually increased about in proportion to the increase of population; but this will not be the case in future, if from no other cause for want of room in the institution to accommodate them. It was remarked by the superintendent, that, during the year 1840, the number of patients on their list was from ten to fifteen more than they had rooms to accommodate; and that they closed the year with 236 patients.

The principal edifices originally consisted of a centre building, 76 feet by 40, four stories high, and two wings, each 90 feet long in front, and 100 in the rear. These being found inadequate, two additional wings have been erected, one at either extremity of the original wings, touching the rear corners of the latter, and receding at right angles from them; the square thus left at the adjoining extremities of the old and new wings, are occupied by verandahs of equal height with the wings, which are used as promenades by the patients of the several wards. Connected with this institution is a chapel, erected exclusively for public worship. A chaplain regularly conducts public worship in it twice each sabbath; these services are generally attended by from two-thirds to three-fourths of all the patients.

In no institution for the insane has manual labor been more extensively introduced, as a part of the moral treatment; and in none has its utility been more satisfactorily demonstrated. The men are employed in almost every department of gardening and farming: some of them work at shoemaking. The women are employed in sewing, knitting, and domestic duties. There were 179 patients engaged in manual labor during the year. Walking, riding, the swing, draughts and other games, afford amusement and recreation; a library of more than two hundred volumes, belongs to the institution, and is much used by the patients. Tea parties are very often given by the matron, and dancing parties assemble several times a year. Many of the men are permitted to walk where they please, generally going in companies of from five

to twenty. In the year 1839, as many as 93 were indulged abroad without an attendant.

In a report made by the trustees in 1840, they say, "In this blessed refuge of mercy, for eight years past, the ministrations of humanity have been dispensed to more than eleven hundred and ninety of our unfortunate brethren, afflicted with all the various and terrible forms of mental malady; and during the whole period, not a blow has been struck, not a chain has been used, nor a harsh word spoken, nor a hard look given: every thing has been done by the intelligence, benevolence and firmness of the master mind of that extraordinary man who superintends and sways, with consummate skill, the discordant elements over which he presides. This may well be considered a model institution, alike for its humanity, economy and success." The *per cent* of recoveries of the *recent* cases discharged, is 91½.

Dr. SAMUEL B. WOODWARD is the superintendent, and has been since its organization. His very interesting letter to the trustees may be found, together with extracts from the reports of this institution, and of others in the same State, under the head "*Massachusetts*," in a subsequent part of this Appendix.

5.—*State of Maryland.*

This State has a *Hospital for the Insane*, at Baltimore, pleasantly situated, on an eminence, about a mile from the city, commanding a fine view of the Patapsco river, Chesapeake bay, and surrounding country, as well as of the city and harbor. It was originally a general hospital.

In 1839, the Legislature made an appropriation to enlarge the establishment, and devoted it exclusively to the insane. The re-organization has rendered it sufficiently spacious for the accommodation and proper classification of 150 patients. It has ten acres of land; but this is inadequate to the wants of the institution. They have now 56 patients. The number from January 1st, 1835, to January 1st, 1841, was 393; of whom 135 recovered, 75 were much improved, 106 discharged stationary, 34 died, and 43 remain unimproved. A large majority of the cases were of more than one year's standing. When the appropriation was made to enlarge the institution, they were required to receive the lunatic paupers of the State at one dollar per week, which is inadequate to defray expenses, and is an embarrassment to the institution, which, notwithstanding it is a State institution, is entirely supported by pay-patients. There is a chapel in the second story, in which divine service is performed every Sunday, and is generally attended by the patients, with salutary effects. Gardening, carpenter's work and various domestic employments, advantageously engage the attention of the patients. Their amusements are walking, riding, fishing, reading, and playing at quoits, chess, backgammon and draughts. Doct. WILLIAM FISHER is superintendent. He has annually made a report of the condition and success of the institution to the Legislature; but no provision has been made to publish these reports. The "*Sisters of Charity*" have had the immediate care of the female department.

6 and 7.—*The State of Virginia.*

This Commonwealth has two State institutions for the reception and treatment of the insane. One at Staunton, Augusta county, in "the valley" between the Blue Ridge and the Allegany mountains. The situation is salubrious; the buildings well planned, and arranged with an eye to the proper classification and treatment of 140 patients. The institution is called "The Western Lunatic Asylum," and is flourishing.

Including 65 acres of land, the whole establishment cost \$66,000, and will accommodate 140 patients. On the 19th October, 1841, there were 180 applicants for admission, who could not be received for want of room. The asylum went into operation on 1st July, 1828. From that time to July 1st, 1836, a period of 8 years, there were 79 admissions and 13 cures. From July 1st, 1836, to 1st November, 1839, the number admitted was 78, and cured 34; though of the 78 admitted, 30 only were recent cases, or those of less than one year's duration. Of the recent cases 25 were cured; which, exclusive of deaths and removals, is equivalent to 83 *per cent*.

In the annual report of the superintendent of this institution made for the year 1839, after describing the benefits of the system of moral treatment practised there, and the probable recovery of so large a proportion of all recent cases, under that system, he adds, "The benefits which have resulted from this *reformed* system do not, however, stop here, but are most strikingly exhibited in the improved condition and increased happiness of those who we have already seen occupy so large a portion of our asylum, and who, although *incurable*, are nevertheless most sensitively alive to every attention with which they are favored; whether it has for its object the improvement of their health, or the promotion of their comfort." And again, he adds, "In estimating the pecuniary benefits which have already accrued, is it not perfectly fair, also, to include what has been saved to the State, by the cure of those who have been restored to their homes and former occupations, and who otherwise would have remained a charge upon its bounty during a long and hopeless life?"

This asylum is under the superintendence of Dr. FRANCIS T. STRIBLING, to whose communication, under date of the 19th October, 1841, the trustees refer for further particulars.

The other asylum for the insane in Virginia, is also supported by the State. It was established at Williamsburgh, near the James river, 10th November, 1769, under an act of the colonial government. On the 10th July, 1770, the court of directors appointed by the Governor and Council, held their first meeting, and proposals were received for building the hospital, and on the 14th September, 1773, the building was completed, at an expense of £1070, and transferred to the directors. It consisted of but one building, which was of brick, two stories high, about 100 feet front. Lately two more brick buildings have been erected, 90 feet from each end of the centre building; running north in parallel lines and corresponding in dimensions and appearance to the original building; and within the last two years a third story has been

added to the centre building, and a wing 90 feet long, two stories high has been erected, connecting the centre with the western collateral building. It will accommodate 120 patients, besides officers and attendants; it is well arranged and sufficiently extensive for the classification of patients. About 20 acres of land are attached to the institution. There are 66 male, and 40 female patients. The hospital, during the war of the revolution, having been occupied as barracks, and a hospital for the sick and wounded of the American army, while the two hostile armies were near York-Town, the records during that period were lost. For further particulars relating to this institution, reference is made to the accompanying communication of Dr. PHILIP J. BARZIZA, under date of the 9th November, 1841.

8.—*State of Ohio.*

The "*Ohio Lunatic Asylum*," at Columbus, was opened for the reception of patients Nov. 30, 1838. It is a State institution, was built chiefly by the labor of convicts, and is supported by direct annual appropriations from the State treasury. It is wholly devoted to the insane of the State; and in admissions the paupers and indigent persons have preference. Idiots are excluded. The main edifice is 300 feet long, a centre building with two wings, built of brick, upon a cut limestone basement. Two rear buildings, or lodges, of 80 feet each, are also of brick. Each wing has 3 stories. The superintendent, in his letter, herewith submitted, remarks, "The accommodations are not sufficiently extensive. I could fill another such building in six months, if I had it." The asylum is not only constantly full, but between 60 and 80 applications, constantly pending, which are necessarily excluded for want of room." They can accommodate 145 patients. During the year 1840, the patients admitted were 140 males, 118 females, total 258. Of these 170 were old cases, 88 were recent, or of less duration than a year; 201 were paupers, and 57 were pay patients. There were discharged during the same period, 120; of whom 80 were cured, 3 improved, 13 incurable, 2 idiots and 22 died. The number of old cases cured and discharged during the same period were 21, incurable 16, died 14. The number of recent cases cured and discharged during the same period were 59, incurable 2 died 8. The whole number in the asylum, at the end of the year 1839, was 61 males, and 53 females. Admitted in 1840, 53 males, and 48 females. The average number for the year 1840, was 131. The number discharged in 1840, was 78; of whom 53 were recovered, 2 improved, 9 incurable, and 14 died. Of old cases discharged during the same period, 14 recovered, 9 incurable, and 11 died. The number of recent cases discharged, 39 recovered, 1 incurable, and 4 died. At the close of 1840, there were in the asylum, 73 males, and 65 females; of whom 119 were old cases, and 19 recent.

There is a farm of 57 acres attached to this institution, worked principally by the male patients. Religious exercises are attended, and performed each evening, and a sermon is read on the sabbath. The superintendent is Doct. WILLIAM M. AWL, to whose letter of 20th October, ult., and also to extracts from the reports of the institution,

under the "Ohio" head, in a future page, the trustees respectfully refer for other particulars.

9.—State of Kentucky.

The only lunatic asylum in this State is at Lexington, and was organized in 1825. It seems to have been designed for the *safe keeping* rather than the *cure* of patients. From the time it was opened to the end of 1838, the admissions were 690, the discharges 301, and deaths 297. On the 1st January, 1839, there remained 122, of whom 54 were males, and 118 females. During the prevalence of Asiatic cholera 43 patients were its victims. The tables of the asylum, for the first fourteen years, exhibit the following facts : viz.

	Admitted.	Discharged.	Died.	Per centage of discharges.	Per centage of deaths.
Men,.....	420	218	155	51.90	36.90
Women,	207	58	83	28.01	40.09
	627	276	238	44.10	37.95

The number of cures is not stated. Of those included in this table 118 were idiots and epileptics ; all of whom died. JOHN CATHERWOOD, Esq. is keeper. For the most part the medical department has been confided to a young physician, at \$150 *per annum*.

10.—State of South Carolina.

A lunatic asylum at Columbia, was established by an act of the Legislature of South Carolina, in December, 1822. Liberal appropriations have been made by the Legislature, for the land, buildings and necessary furniture, to the amount of about \$115,000. It now depends upon its own resources for support. One large centre edifice of brick, with ample wings of the same materials, is calculated for the accommodation of from 90 to 100 patients. Pay-patients are received at from \$2.50 to \$7.50 *per week*. The *pauper patients* of the state the institution is compelled by law to receive at \$100 *per annum* : this sum, it is said, is insufficient to pay expenses.

There are now in the asylum 23 males and 29 females. The number of patients, of both sexes, for several years in succession, ranges between 60 and 80 annually. The number of patients discharged in each year has varied from 12 to 15. The number of deaths each year will average from 5 to 10. The quantity of land attached to the institution is about 34 acres. For other particulars relating to this institution, see the accompanying letter from the superintendent, J. W. Parker, Esquire.

11.—*State of Tennessee.*

In 1838, the Legislature of Tennessee provided for the erection of the "*Lunatic Hospital of Tennessee*," at Nashville. In January, 1840, another law was passed for the organization of the hospital, under a board of seven trustees, and directing it to be opened by the 1st of March next for the reception of patients. Its superintendent is Dr. JAMES OVERTON. No response having reached the trustees to the circular to this institution, they can add no more respecting it.

12.—*State of Georgia.*

By an act of December 26, 1837, the Governor of Georgia was directed to appoint a committee to select a site, and erect a *lunatic asylum*. The trustees have been informed that it is located at Milledgeville, and they addressed a circular to the institution, but have received no response.

13.—*State of New-Jersey.*

The Legislature have, at two successive annual sessions, made investigations upon the subject of insanity, and the number of persons in this State laboring under this disease, which will probably lead to the erection of a State lunatic asylum.

¶ *Note.*—Pennsylvania, Connecticut, and some other States have also taken incipient steps for founding similar institutions; and probably, in the course of a few years, one will be found in every State. Pennsylvania has commissioners appointed to select a site.

II. CITY INSTITUTIONS.

1.—*Boston Lunatic Hospital.*

This is entirely a charitable institution, provided by the city of Boston, for the benefit of the *insane poor*, who are supported at the expense of the city. Consequently, a large proportion of its inmates are idiotic and incurable. The present edifices were finished in 1839. The location of the hospital is in South Boston, and "is delightful; situated half way between the House of Industry and the House of Correction: it commands on the front a view of the extensive gardens and highly cultivated grounds of the adjacent institutions, and in the rear the almost unrivalled panorama of the harbor and city of Boston." It is under the care of Dr. JOHN S. BUTLER, whose letter to the trustees, hereto annexed, under the head of *Massachusetts*, is full of details, interesting to those who wish to become familiar with this subject.

2.—*New-York Pauper Lunatic Asylum.*

This is a branch of the Alms-House establishment of the city of New-York. It is entirely a charitable institution, supported by the city and county of New-York. It is located on Blackwell's island, in the East river. When the buildings shall be fully completed, they will accommodate 400 patients. It was opened for the reception of inmates in 1839.

The trustees have been favored with a letter from ALEXR. F. VACHE, M. D., the resident physician of the New-York Alms House, at Bellevue, dated January 4, 1842, which furnishes the following interesting facts connected with this subject :

"There are in the asylum on Blackwell's island, 305 patients, as follows : 142 males, and 163 females ; of whom 132 are cases of mania, 78 monomania, and 95 dementia, &c. Of this number, 159 are considered incurable, 71 curable, and 75 doubtful. The general health of 197 is positively good ; the remainder, 108, are under treatment for various diseases besides lunacy.

"No lunatics are confined in the county jail ; but from 20 to 25, principally idiots, and not included in the above, are kept in the Alms House, at Bellevue.

"The department has no account of the expense of lunatics, separate from that of the ordinary pauper ; but the cost of each person, sane and insane, in the year 1840, was one dollar and four mills per week."

III. CORPORATE INSTITUTIONS.

1.—*The McLean Asylum for the Insane.*

This is a department of the Massachusetts General Hospital, finely accommodated with spacious buildings, delightfully situated, on elevated ground, in Charlestown, near the city of Boston. In all its tasteful arrangements and truly comfortable style of entertaining its inmates, there is evidently a design to please those who are somewhat accustomed to the luxuries of life. And, so long as two other institutions in the same State offer ample provision for the comfort and recovery of the poor, and of all whose pecuniary means are moderate, there is an obvious propriety in rendering this as attractive as possible for the rich. The very full letter which hereafter may be found, from the accomplished superintendent, Doctor LUTHER V. BELL, and extracts from his last two reports, will give further details.

2.—*Retreat for the Insane at Hartford.*

This is the only Institution, at present, in the State of Connecticut, for the reception and treatment of the insane. It is a flourishing institution, of deservedly very high character. It is about a mile from the city of Hartford, upon rising ground, and commands a fine view of the city, and a most beautiful country around it. It was opened in 1824. Further particulars may be found in the following pages, under

the "*Connecticut*" head, in extracts from letters and reports from the able pen of the learned and indefatigable superintendent, AMARIAH BRIGHAM, M. D.

3.—*Bloomington Asylum for the Insane.*

This institution is pleasantly situated on the east bank of the Hudson river, 7 miles north of the city of New-York, on Manhattan Island, in full view of the river. It has extensive and highly cultivated grounds ; the crutilage is ornamented with flowers and shrubbery, arranged and cultivated with taste, and well calculated to awaken cheerful reflections, and dispel those hallucinations which cluster around the bewildered mind. It is a branch of the New-York Hospital, which was founded by the Earl of Dunmore, Governor of the Province of New York, on the 13th of June, 1771. In 1773, the Provincial Legislature granted to the Hospital an annual allowance of \$2,000, for twenty years. In 1775, the building, which was then being erected for the reception of the sick, and was nearly completed, took fire and was mostly consumed ; by which the loss sustained by the Hospital was *seven thousand pounds*. The same year, in March, the Legislature appropriated to the Hospital *ten thousand dollars*, to aid in rebuilding the edifice ; but the breaking out of hostilities, followed by the struggle for independence, prevented the completion of the edifice until after the war. The annuity of 2,000 ceased when the war commenced. After the war was closed, and peace restored, and on the 1st of March, 1788, the Legislature of the State granted to the Hospital the sum of \$2,000 annually, for four years, to be paid by the city of New-York, out of the excise money collected there ; and on the 11th April, 1772, made another appropriation to the Hospital of \$5,000 annually for five years, payable out of the same fund. On the 31st March, 1795, the Legislature made an appropriation of \$10,000 annually for five years, payable out of the auction duties in the city of New-York, and repealed the act of 11th April, 1792, as to future payments.

On the 1st April, 1796, the harbor-master of the port of New-York was ordered to pay certain fines into the treasury of the Hospital ; and on the 11th April, 1796, the Legislature granted to the Hospital the further sum of \$2,500 annually, for four years, payable out of the auction fund. On the 12th March, 1801, the Legislature, also granted to the Hospital, annually, \$12,500 to be paid for five years, from the 1st February, 1800 ; which grant was afterwards, by an act passed on the 14th March, 1806, directed to be continued until the year 1857 ; payable also out of said auction duties.

At this early period of our history, there was no institution in the State for the reception and cure of lunatics ; and the governors of the hospital appropriated apartments in that institution for the accommodation of the insane. But the buildings having been erected for the accommodation and treatment of a different class of the sick, were found inconvenient and inadequate. To supply this deficiency the governors of the hospital, in 1806, applied for and obtained the passage of the law of 14th March, of that year, herein before referred to, to enable them to

erect a distinct building, for the exclusive accommodation of the insane. Upon the passage of this act the governors did erect a separate edifice, near the hospital, denominated "The Lunatic Asylum," sufficient for the accommodation of 80 patients ; which edifice was finished at an expense of \$56,000, and opened on the 15th July, 1808, for the reception of lunatics. To remunerate the hospital for the expense of erecting this building, the Legislature, on the 23d March, 1810, granted to the hospital the sum of \$3,500, to be paid annually, for ten years, payable quarterly, out of said auction duties. In 1815, the governors of the hospital applied to the Legislature for assistance to purchase an adequate quantity of land near the city of New-York, and to erect suitable buildings thereon, with a view of adopting a course of moral treatment for the lunatic patients. On the 17th April, 1816, the Legislature granted the sum of \$10,000, to be paid to the hospital annually, until the year 1857 ; whereupon the governors of the hospital purchased 77 acres, 2 roods, 34 perches of land, at Bloomingdale, and erected thereon the asylum, near which, since that time, another building has been erected for noisy patients exclusively. The land and expense of building and improvements, &c., up to 31st December, 1821, was \$196,110 41, exclusive of \$6,802.02, paid for furniture, and other contingencies, in fitting up the establishment. The asylum is yet under the government of the governors of the city hospital.

The last two acts passed, April 25, 1840, and May 26, 1841, in aid of this hospital, are truly magnificent ; one granting \$15,000, annually, for 20 years, the other, besides a gift of \$15,000, a further annuity of \$15,000, for ten years.

For statistical facts, see, in a following page of this appendix, a letter from Dr. WM. WILSON, resident physician of the asylum ; and extracts from the last annual report of the institution.

4. *Pennsylvania Hospital for the Insane.*

This institution, on the 1st of January last, was first opened for the reception of the insane, in buildings erected for the purpose, entirely away from the general hospital of Pennsylvania, though still under the same direction, and a constituent part of that venerable, active, and beneficent corporation. Its present location is west of the Schuylkill, and about two miles from the city of Philadelphia.

The buildings are appropriately arranged, and every thing about them rightly planned to promote the comfort and cure of this most afflicted portion of the human family. It is a splendid establishment. No expense has been spared in its erection, that would contribute to the suitable accommodation of the patients.

The "Pennsylvania Hospital," founded in 1750, is one of the oldest and one of the best institutions of the kind in the United States. The following table exhibits the number of admissions, and the results of treatment, from February 11th, 1752, to April 28th, 1832, a period of more than eighty years :

[Senate, No. 20.]

H

	Admitted.	Cured.	Relieved.	Removed by friends.	Eloped.	Died.	Remaining.
Men,.....	2,509	905	488	499	188	359	66
Women,....	1,209	384	292	264	42	171	60
Total,.....	3,718	1,289	780	763	230	530	126

From April 28, 1832, to April 28th, 1840, the number admitted was 584 ; cured 191 ; died 72.

Previous to the year 1823, the cases of mania à potu were included with those of insanity. Since that year, they are not included.

Further particulars may be seen by reference to a letter from THOMAS S. KIRKBRIDE, M. D., superintendent and physician, to the trustees, and hereto appended, under the "*Pennsylvania*" head.

5. *Asylum at Frankford, Pennsylvania.*

This excellent asylum was visited by the committee of the trustees, who were much pleased with it. The following accurate account of it is extracted from an interesting little work, published last spring, by the resident physician of the asylum, PLINY EARLE, M. D. Some further particulars may be found in a letter to the trustees, from their worthy superintendent, JOHN C. REDMOND, hereinafter published.

"This institution, generally called, in the reports, 'The Asylum for the Relief of Persons deprived of the use of their Reason,' is pleasantly situated, about six miles northerly from the city of Philadelphia. The principal edifice consists of a central building and wings, and, at the extremity of the latter, other buildings, called 'lodges,' intended for such patients as may be so noisy as to disturb the others. The front, formed by these several portions, is 322 feet 8 inches in length. The farm contains sixty-one acres, which is divided into airing courts, and garden, tillage and woodland. The airing courts and the grounds in front of the building are well shaded with large and beautiful trees.

"This asylum was opened in Fifth month, (May,) 1817, and for many years was restricted exclusively to members of the Society of Friends. In 1834, however, it was opened to others, who still continue to be admitted.

"The number of admissions, from the time of opening to the close of the year 1838, a period of nearly twenty-two years, was 634. Of these, 331 were men, and 303 women.

"*Civil State.*—There were, single, 326 ; married, 234 ; widowers 17 ; widows, 57.

Ages at the time of admission.

Below 20 years.	From 20 to 30.	30 to 40.	40 to 50.	50 to 60.	60 to 70.	70 to 80.	80 to 90.	90 to 100.	Total.
28	187	141	126	83	48	15	5	1	634

Of the 634 patients, 507 were never readmitted. The following table exhibits the result of their treatment :

Duration.	Admitted.	Restored.	Much improved.	Improved.	Stationary.	Remaining.	Died.
Less than 1 year,	261	152	26	27	18	4	34
From 1 to 2 years,	57	18	8	8	9	7	7
“ 2 “ 3 “	36	17	3	3	4	5	4
“ 3 “ 5 “	45	14	7	6	9	3	6
“ 5 “ 10 “	47	13	7	3	8	11	5
Over 10 “	61	0	7	5	22	13	14
Total,	507	214	52	52	70	43	70

“During the year ending 1st of Third month, (March,) 1840, the number of admissions was 54 ; that of discharges, including deaths, 60. Of the latter, 25 were restored, 5 much improved, 9 improved, 17 stationary, and 4 died.

“*Religious Worship.*—Those patients whose condition will admit, assemble on Sabbath afternoons to hear a portion of the Scriptures. Some of them attend meetings in the village of Frankford.

“*Labor.*—During the warm season, many of the patients are employed in gardening and farming. In winter, they work in two shops, one devoted to basket-making, the other to carpentry. They keep the reservoirs in the asylum supplied with water, throughout the year. It is driven up by a forcing pump, operated by a crank.

“*Amusements.*—A grove of about 20 acres, at one extremity of which an enclosure of two acres contains several deer, and, at the other, a summer house is erected amid romantic scenery, forms a pleasant place for rambling in summer. Horses and a carriage are devoted to the use of the patients, and the means are furnished for many of the games mentioned in the notices of other asylums. Tea parties are given occasionally, and lectures upon natural philosophy and chemistry are delivered weekly, during the winter. But the sources of diversion most resorted to are, 1st, a circular railway upon the lawn in front of the house, in a small car upon which two persons may drive

themselves, with great rapidity, by means of a crank ; and, 2d, a library. A small building, at the extremity of the garden, opposite the house, is devoted to this purpose. Externally, it is surrounded with a corridor, the pillars of which are overgrown with honeysuckle. Within, it is carpeted, and otherwise well furnished ; upon the walls are framed engravings ; two series of shelves are supplied with about 300 volumes of useful books ; the whole of one side of the room is occupied by a cabinet of minerals, shells, corals, and stuffed birds and quadrupeds, while lemon and orange trees, with a variety of flowers, give a delightful fragrance to the air. This retreat is much resorted to by the patients—the women having the use of it during the forenoon, and the men in the afternoon.”

IV. PRIVATE ASYLUMS.

1. *The Hudson Lunatic Asylum.*

This institution, situated upon the east bank of the Hudson river, about 30 miles south of Albany, was established by Dr. S. WHITE, July, 1830, and is continued under his own supervision, and that of his son, Dr. G. H. WHITE. It is wholly supported by payments for patients. In 1838, the whole number of patients under treatment in this institution was 98 ; of these 30 were recent cases, 65 chronic, and 3 intemperate. The whole number in 1840 was 84 ; of these 25 recent, 54 chronic, and 5 intemperate. Of the recent cases in 1840, 15 recovered, 5 were much improved, 3 improved, 1 stationary, and 1 died ; of the chronic cases in the same year, 9 recovered, 27 very much improved, 15 improved, 10 stationary, 1 died ; of the intemperate 2 reformed. Of the recent cases in 1840, 14 recovered, 2 improved and 2 died ; of the chronic cases the same year, 7 recovered, 10 much improved, 5 improved, 2 stationary, and 3 died. Remaining 1st January, 1839, 43 ; 1st January, 1841, 36. The whole number admitted from the opening the institution, to January, 1842, is 550.

The building, which is large, and of stone, was originally designed and occupied by the city as an alms-house ; but, being vacated, and the poor removed to the interior of the county, it was purchased by Dr. White, and appropriated to the accommodation of this unfortunate class of the community. Since then, many improvements and alterations have been made in the former building, and out wards been added, for the better classification of the patients, by the proprietors.

2. *Macdonald's Asylum, in New-York.*

Doctor James Macdonald, of No. 29 Clinton Place, in the city of New-York, has recently opened a private asylum for the insane, which is spoken of in terms of high commendation.

Its proprietor has favored the trustees with a very full and interesting communication upon the subject of the State Lunatic Asylum, which is hereto annexed ; and to which they invite respectful consideration.

3. *Pepperell Asylum, Mass.*

This asylum for the insane, pleasantly situated in the town of Pepperell, Middlesex county, about 33 miles from Boston, is under the care of Dr. CUTTER, and entirely a private affair.

4. *Chaplin's Asylum, at Cambridgeport.*

The late Dr. CHAPLIN established a very successful private asylum for the insane, several years ago, at Cambridgeport, a flourishing village in the town of Cambridge, Mass. about midway between the University and West-Boston bridge. It has been kept open by his widow since the doctor's decease.

No. II. VERMONT.

(1.) *Letter from Dr. W. H. ROCKWELL, Superintendent of the Vermont Asylum for the Insane, to Hon. D Russell.*

Brattleboro', Oct. 14, 1841.

DEAR SIR—

Yours, mailed the 11th inst., is just received, and I hasten to reply to your interrogatories. Our institution was first opened December 12th, 1836. The widow Anna Marsh, of Hinsdale, N. H., died, and left a legacy of \$10,000 for the purpose of establishing a lunatic asylum in *Windham co., Vt.*, and appointed four trustees to see that her designs were carried into effect. All of these trustees resided in *Brattleboro'*, and *of course* located the asylum in their own town. Justice to them, however, requires me to mention that when they applied to the Legislature for an act of incorporation, they generously offered to relinquish the claims of *Windham co.*, and have the asylum located in some more central part of the State, if it could be done, and still retain the legacy. It was then decided that it could not.

Our trustees have the power of filling any vacancy in their board. It was thought best it should be so ; for if the trustees were appointed by the Legislature, there was danger that there might be a change of officers in the institution with a change in the party politics of the State. In granting the act of incorporation, the Legislature made the judges of the Supreme Court our "board of visitors;" and if they shall ever find the asylum so managed as not to carry out the designs of the said act, or any abuses whatever, they have full power to correct the same.

It was not originally intended for the insane poor only, but for all insane persons, both of this and other States.

When the trustees commenced, they purchased the mansion house of the late Joseph Fessenden, Esq, and the farm connected with it, of about fifty acres. They enlarged the house, and adapted it as well as they could for the accommodation of about thirty patients. They then supposed that they had made ample provision for all who might apply for admission for at least ten or twelve years. Their funds were so limited, that they did not consider themselves warranted in attempting to erect a proper building for the purpose. In about six months from the time it was opened, the building was so crowded that we were obliged to reject applications. As soon as the Legislature met, we presented a petition for funds to erect a new and suitable building. They made an appropriation by which we were enabled to erect the centre building and one *short wing*. This and the old building were soon

filled ; and last fall we obtained another appropriation, by which we have been able to build the other wing this season. When our new building is finished, it will furnish dormitories for about one hundred patients, which, together with the old building, will enable us to accommodate about one hundred and thirty. Our new building is built of brick. The size of the dormitories is the same as those at Worcester, that is, nine feet by twelve, including walls, or a little more than eight by ten, exclusive. The new wing which we have built this season, is ten rooms long, or ninety feet in length. The first was but sixty-three feet, which must be lengthened twenty-seven feet to preserve the proportions. The details of our new building, you will find in our second annual report. When it is finished, it will have cost about \$20,000. Our old building is of wood.

At the present time, we have ninety-seven patients—fifty-three females, and forty-four males ; thirty-one of whom are from the State of New-York. *We have had no suicide, or serious accident*, since we commenced. We do not wish to boast of our vigilance, but it can not be said of any other similar institution in the United States, which has been in operation five years.

We have about fifty acres of cultivated land, which was bought for \$50 per acre. It is cultivated almost entirely by the patients. We have but one man, who takes charge of the farm, horses, cattle, swine, and indeed every thing which pertains to the farm. His only assistance is that of the patients ; and we could cultivate twice the quantity to good advantage. The exercise—in a word, the means of cure produced by useful employment in the open air, on the farm and premises, are of more service for the restoration of our male patients, than all other moral means whatever. We have a span of horses, and carriages, devoted exclusively to the benefit of the patients, and our females ride every fair day. They also frequently take their walks, and the male patients go out on excursions for fishing, gathering nuts, and other fruit, as well as to see objects of natural history and curiosity. The male patients play ball, quoits, and the like. We have a library for reading, and various other amusements, such as playing billiards, chess, backgammon, draughts, battledoor, graces, &c., all of which are of great use. Our great object is to keep the mind pleasantly occupied.

We have a carpenter's shop for those who are joiners, or cabinet makers. We have much useful labor performed in it. All of the sawing, piling, and carrying of wood is done by our male patients. All of the bedding is made by our female patients, and most of the patients' clothing is made and mended by them.

We receive patients from all the States. We require no certificates of lunacy. If we should find after a short (or longer) residence, that the patient was placed here, only to prevent his being punished for crime, or that his pretended friends wished to confine him, that they might use his property, or for any such reason, we should immediately discharge the patient. Perhaps it would be better if some certificate of the patient's insanity was required. Since we opened our institution we have had no "improper subjects" offered for admission. We have had three or

four brought here who were only afflicted with a delirium from typhoid fever, who were in one sense, improper subjects. They were also received.

According to the late census there are 394 insane and idiotic in this State, which I think is far below the true number. 140 of these are supported at the public expense. There is no asylum in the State, except the one at Brattleboro', and very few are sent out of the State.

Those patients of *this State who are indigent* are received for two dollars per week. All others for two dollars and fifty cents. This defrays all the current expenses and the salaries of the officers.

The officers of this asylum are a superintendent, an assistant physician, and matron. They are appointed and paid by the trustees. We have six men and eleven women employed as attendants and domestics. They are employed and paid by the superintendent. The superintendent's salary is \$1000 per annum. The assistant physician's salary is \$100. The matron's \$200. The superintendent is also allowed a chambermaid and her board, for his family. We give our male assistants from 12 to 14 dollars per month. We give our female assistants from \$1.50 to \$2 per week.

In preparing a system for the government, discipline and management of a lunatic asylum, a great regard should be paid to the condition of those who will be admitted. For instance, it would require a very different system for the one at Worcester, Mass., from the one at Charlestown, Mass.

I have heard it stated that the patients received at Utica, would be sent at the expense of the county in which they resided, and that the building now finished would accommodate but a small part of these insane. If that statement is true, I should think it best that a preference should be given to recent and curable cases, to those which are old and incurable. For the greatest good would be done in this way. And as soon as the other buildings are finished, the chronic cases could be admitted. As I know so little of the designs of your asylum, I will not weary you with any remarks of this kind.

Our system of regulations have never been printed. They are very similar to those which have been printed at Augusta, Charlestown, Worcester, Columbus, &c., all of which I presume you have seen. After all, it will depend in a great measure upon him whose business it is to see that the regulations are observed and executed for the success of the institution. As you will have the largest I trust you will have the best regulated establishment in the U. S.; or the whole world. As you did not specify what particular subjects you wished me to give my views, except those contained in the several interrogatories, perhaps I have omitted those topics upon which you most wished I should write.

I have written the above hasty remarks amidst a great pressure of business, which I hope will be a sufficient apology for the looseness in which it is written. To accompany this I shall send our annual reports. The fifth report will be printed in a few weeks.

Very respectfully, &c.,

W. H. ROCKWELL.

(2.) *Extracts from the 5th Annual Report of the Vermont Asylum for the Insane; October, 1841.*

"Since the opening of the establishment, three hundred and twenty-three patients have been admitted. Two hundred and twenty-eight have been discharged, and ninety-five remain in the institution. Of those discharged, one hundred and thirty have been restored to reason and usefulness. Sufficient has already been accomplished, to amply compensate for all the expenses which have been incurred in erecting and supporting the institution. But when we contemplate the future beneficent results which will probably attend its operations, we feel greatly encouraged to persevere in this benevolent enterprise."

"The mode of treatment which is practised at this asylum, and which has been attended with such signal success, has ever commanded our entire approbation. The discipline of former times, which consisted in the exhibition of physical force, and awing the patients into submission, the object of which was the security of the patient and the public, has never been introduced into this institution. In its moral management, it is made the duty of every officer and assistant to endeavor to secure the confidence and good-will of the patients. For this purpose they are treated with the greatest kindness and forbearance. They are made to understand, as far as they are capable, that whatever restraints are necessary are not applied for the purpose of punishment, but for their own benefit. They are promoted in their classification as soon as they have the power of self-control, which operates as a powerful inducement to make proper efforts to retain their places. They are never subject to any personal restraint unless to prevent violence, or the destruction of property.

"The sewing parties of the females have been continued as formerly, and with the best results. So highly do the patients consider the privilege of attending them, that many who are wild and boisterous in the halls, will control their feelings during an afternoon while at these assemblies. There are also frequent quilting and sewing parties in the halls. All the bedding for the new wing, as well as all the regular sewing for the asylum, has been done by the patients under the direction of the matron and the nurses. The consciousness of doing something for their fellow sufferers, affords them grateful reflections."

"The effects of our religious exercises have been very beneficial. All who are in a proper condition attend them, and to many they are the source of the greatest comfort. We have had religious exercises from the commencement of our operations. In no instance do we recollect of their being injurious to any individual, and to many they have been of great benefit."

The number of patients remaining at the close of the year,	81
There have been admitted during the year,.....	84

Total enjoying the benefits of the asylum,.....	165
There have been discharged during the year,.....	70

There remains October 1st, 1841,.....	95
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Of the 70 cases discharged there are		
Recovered,	41	
Not recovered,	25	
Died,	4	
	—	70
Of the 35 recent cases discharged, there have		
Recovered,	31	
Not recovered,	3	
Died,	1	
	—	35
Of the 35 chronic cases discharged, there have		
Recovered,	10	
Not recovered,	22	
Died,	3	
	—	35

Recovered of all the cases discharged the past year $58\frac{4}{7}$ per cent,
 “ “ the old cases discharged the past year $28\frac{4}{7}$ per cent.
 “ “ the recent cases discharged the past year $88\frac{4}{7}$ per ct.
 “ “ the cases discharged, 57 per cent.
 “ “ the old cases discharged $28\frac{3}{4}$ per cent.
 “ “ the recent cases discharged $89\frac{1}{5}$ per cent.

Terms of Admission.—For convenient accommodations in the wing, two dollars and fifty cents per week. For indigent patients of *this State*, two dollars per week, or one hundred dollars per year, if they remain so long in the asylum. Those who require extra accommodations, and those laboring under nervous diseases, will be received at reasonable prices, according to the accommodations required. No patient will be received for a less term than three months. But if the patient should recover before the expiration of that term, the pay for the unexpired time will not be required. If the patient remain longer than three months, the subsequent payments will be required only for the time the patient remains. No charge is made for damages in any case.

(3.) *Extracts from the first Annual Report of the Trustees of the Vermont Asylum for the Insane.*

Their testimony is important in regard to the benefits which flow from removing the patient from his friends at home to the asylum :

“It is generally understood, that there are few chances for the recovery of the insane, so long as the patient remains amidst those objects and scenes which originated and continually operate to aggravate his disorder; while, of those who are placed at a well regulated asylum on the first approach of the disease, as great a proportion are restored, as of any acute physical disorder in which the symptoms are equally violent. At no other places can the insane be made equally comfortable. Here he will quietly acquiesce in the discipline of the asylum, notwithstanding his impetuosity and violence at home. He is now removed from every cause which excited and exasperated his disorder,

and enjoys that liberty in which he could not be indulged in any other place. Here, also, he is furnished with wholesome and nutritious food, his person is kept clean and neat, and he is protected from every exposure. And last, but not least, his friends are relieved from an insupportable weight of care and anxiety, knowing that he here enjoys every comfort and convenience of which his case will admit."

The testimony of the superintendent is strongly in favor of **RELIGIOUS EXERCISES** :

"From the opening of the asylum, we have introduced religious worship among our patients. Our family worship, in which all the quiet patients are allowed to partake, consists in reading daily, after tea, a portion of the Scriptures, singing a hymn, and a prayer. On the Sabbath, in addition to the above, a short sermon is read. The effect of these exercises on the patients has been highly salutary, and has shown that they are no less a means of cure than of gratification to the patient. At these seasons, they are very quiet and attentive, and several have begun to exercise that self-control which has resulted in their restoration. The monotonous routine of daily life is hereby interrupted, and they are led to the recollection of former and happier days, on which their minds delight to dwell, and they confidently look forward to the time when they shall again be restored to their friends and society. Here, also, the despondent forgets for a time his cares and sorrows, and experiences the consoling and soothing effects of religious worship. He is comforted and sustained by the reflection that there is a Friend, who, while on earth, was 'touched with a sense of human infirmity,' and is ever able to relieve the afflicted and heavy laden. They perceive that they are united with, and are remembered by their fellow-men, and thereby place a greater confidence in those to whose care they are committed. Were it not for our religious exercises on the Sabbath, Sunday would be the most tedious day of the week. As all labor, exercise, and amusements are suspended on that day, if the patients are deprived of the privilege of uniting in religious worship, they consider themselves as shut out from the society of their fellow men, and are induced to cherish an irritable and misanthropic disposition, which only aggravates the disease. Those that are in a suitable condition, attend church on the Sabbath."

The testimony of the trustees in favor of **KIND AND PARENTAL TREATMENT** is equally clear and decisive :

"The grand system of moral treatment, as pursued at this institution, is kind treatment, useful employment, and wholesome discipline. When a patient enters the asylum, (however violent and distrustful he may formerly have been,) he soon perceives that the principles of kindness pervade every regulation of the institution. By experiencing constant proofs of the parental kindness and regard of the superintendent, he soon cherishes for him the sentiments of friendship and esteem, and cheerfully confides in the plan adopted for his restoration. By continual employment, his former associations and habits are awakened and cherished, and his mind and body become invigorated. From the well-

regulated discipline which every where prevails in the institution, and which is adapted to the welfare of his little community, he finds that his own rights are regarded and protected. In this manner, the violence of the disease is diminished, and his mind gradually becomes divested of its hallucinations, and is finally restored to its natural healthy state."

No. III.—MASSACHUSETTS.

(1.) REPLIES TO QUESTIONS PROPOUNDED TO THE SUPERINTENDENT OF THE MCLEAN ASYLUM; BY THE PRESIDENT OF THE BOARD OF TRUSTEES OF THE NEW-YORK STATE LUNATIC ASYLUM.

1st. *When was the McLean Asylum at Charlestown, Mass. established? By what authority? At what expense, and how endowed?*

"The McLean Asylum for the Insane," is one department of the Massachusetts General Hospital. The other department for common hospital purposes being in the western part of the city of Boston.

The origin of the Massachusetts General Hospital is briefly as follows: In 1797 a gentleman of Boston made to that town a bequest of \$5,000, "towards building a hospital, as soon as the town should determine to begin the work." In 1810, two eminent physicians addressed "a circular letter, in which the advantages of a hospital were stated with force and justness, to several gentlemen of Boston, possessed of ample fortunes, and disposed to contribute to institutions in which the public good was concerned."

In the beginning of the next year, fifty-six gentlemen in various parts of the Commonwealth, were incorporated by the name of the "Massachusetts General Hospital."

The charter allowed property to be held to the yearly income of \$30,000—granted a fee simple in the estate known as the "Old Province House," (estimated at \$40,000,) on condition that \$100,000 should be raised by subscription, within ten years; constituted the Governor, Lieut. Governor, Pres't of the Senate, Speaker of the House, and two chaplains of the Legislature, a board of visitors, to visit semi-annually, or whenever they think it expedient.

The corporation was authorized to change its name to that of any benefactor who should contribute a sum exceeding that given by the commonwealth.

Trustees were chosen in 1813, but owing to the general distress and embarrassment of the country, they forebore collecting subscriptions and donations till the autumn of 1816; when the subscription was attended with remarkable success; 1,047 individuals subscribed either to the "hospital," or to the "insane departments, or to both, of whom 245 contributed to the amount of \$100 and over, the sum required by the by-laws to constitute a member of the corporation.

The whole amount of donations was as follows:

Without direction as to which department to be applied, ..	\$74,599 87
Exclusively for the hospital,	73,809 29
Exclusively for the insane asylum,	53,997 47

Whole amount,	<u>\$202,406 63</u>
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Omitting the consideration of the "hospital proper." The insane asylum was located in 1816, at a promontory in Charlestown, known in the revolutionary war as "Cobble hill;" it being wisely concluded that the limits of a large and increasing town did not afford so advantageous a position for such an object as a convenient rural site. Fifteen acres of fine land on the top of the hill, extending down to the bay on the southern side, and comprehending a large, commodious, and as experience has shown, a well adapted house, were purchased, and two wings were erected at a distance of 60 or 70 feet on each side, for patients of each sex, each three stories in height, and about 76 feet by 40 in size.

This purchase of land and the erections cost \$90,000, and was designed for 60 inmates, 30 of each sex. Patients were received in the fall of 1818, but the asylum was not filled till 1825.

In 1821, John McLean, Esq. of Boston, left by will about \$100,000 to the corporation, which then voted to designate the asylum by his name, in accordance with a provision of the charter.

The principal part of his legacy was expended in adding a new building, 90 by 46 feet, and a lodge building, 50 by 25 feet, for male patients, and in effecting general improvements, which want of information in the early arrangements had rendered necessary.

In 1835, Miss Mary Belknap, of Boston, left a legacy of near \$90,000, (its exact value not yet determined, as some annuities are still payable from it,) which enabled the trustees to erect similar additions to the female accommodations.

With these successive additions, the number of patients who can be conveniently accommodated is about 140, or 70 of each sex.

As to the question of endowment, it may be observed that of late years the insane asylum has more than met its expenditures from its receipts from the board of patients, leaving all the income of the general hospital to be distributed for the relief of poor patients at the department in the city. This result has followed from the insane of wealth of this section being placed here almost without exception, (there now being no private institution in New-England,) and at a price measured by their pecuniary ability. All the patients pay a weekly rate, but more than one-half are received at \$3 per week, a rate less than cost, and and this deficiency being met by others paying as high as \$8, \$10, or \$15 per week. The receipts for the last five years have more than met the expenses.

2d. *Was the asylum originally designed for the insane poor only, or for the reception of such, indiscriminately, as labor under mental alienation? Has the original design been changed; and if so, for what cause, by what authority, when, and in what particulars?*

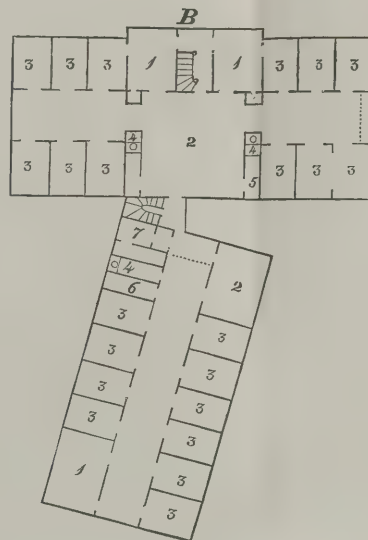
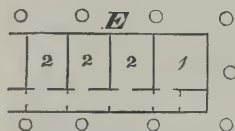
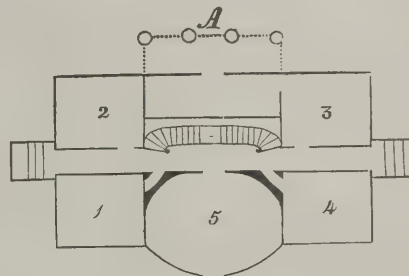
Nothing was said in the charter as to the class of sick or lunatic persons who were to be received, except that the Legislature reserved to itself the power of sending a number of commonwealth (or county) paupers to either department, not exceeding 30, free of cost. This clause was never acted upon, having been repealed in 1813, of course some years before either branch went into operation.

The whole matter was thus left open to the discretion of the trustees, whose aim has doubtless been to do the greatest good to the greatest number of sufferers, sick or lunatic. To effect this a large portion of the beds of the hospital in Boston, have been "free" from the first, while the insane of this Commonwealth have been received at no time at a rate lower than \$3 per week, and residents out of this State, at an advance on that rate differing at various periods, and now being \$4.50. A liberal course as to abatements of bills has always been pursued where particular circumstances have called for it.

Prior to the establishment of the State Lunatic Hospital at Worcester, towns were in the habit of maintaining their pauper lunatics here, at the lowest rate, and in some few cases still do so. But since that institution and the City Lunatic Hospital have been in operation, the number from the lower classes as to property has diminished very much. At the same time, the more general acquaintance with the advantages of public institutions has much increased the demand from the wealthier classes for admission, so that without any design or intention on the part of the institution or its officers, the social position of our inmates has essentially changed of late years. Did not one institution in this Commonwealth receive the wealthy, they would be actually worse off than the poor; for private asylums, known in all European countries as sinks of wrong and abomination, and deprecated by all philanthropists, would be inevitable.

3d. *Were the buildings originally designed for an infirmary? Of how many and what buildings does the establishment consist? Of what dimensions are the buildings? Of what materials built? What is the number of dormitories and other rooms? What their size? Are they well adapted to the treatment, and sufficiently extensive and numerous for the classification of the patients, &c.?*

All the buildings except the central mansion, used for the dwelling of the officers, offices, kitchen, &c. were built expressly for an insane asylum. They are all of brick, slated, and as far as construction is concerned, in the most thorough and expensive manner. The following sketch of the main floor will answer most of the enquiries under this head. I have drawn it to a scale smaller than would be desirable, but as large as the paper will well admit:



REFERENCES.

D. *Male Lodge.*

1. Gallery.
2, 2, &c. Sleeping rooms.
4. Water closet.

In this sketch no attempt has been made to represent the barns and other necessary buildings.

In reply to the part of this interrogatory, whether the buildings are well adapted to the end in view? I would observe, that though not planned as they doubtless would have been, had there been at the period of their erection any asylum to have served as a model or pattern, or even if they had been completed at one time, still I believe the great indications to be regarded in care of insane patients have been as well secured as in almost any institution I have noticed.

Classification, abundance of space, inspection, freedom from appearances of a prison, ventilation, heating and security are all well effected, although at a cost, in original outfit and in usual operation, far beyond what would be necessary with the present experience and knowledge on the subject.

The female wing comprises as many, if not more, facilities for the comfort, safety and curative treatment of the classes who now are received, than I have found combined in any institution I have examined in this country or in Europe.

4th. How many patients are there in the asylum at present of each sex, and how many has there been each year since its establishment? How many have been discharged? How many cured? How many died? How many committed suicide, if any?

There had been during the present year an average of about 140 patients; 80 males and 60 females. The present number is 137; 74 males and 63 females. The annexed table will answer most of the other inquiries under this head:

Patients received and discharged annually since the opening of the asylum, with the results of cases.

YEAR.	Admitted.	Discharged.	Unfit.	Eloped.	Dead.	Not improved.	Improved.	Much improved.	Recovered.	Remaining at end of year.
1818, } -----	58	36	1	0	5	5	9	4	11	23
1819, } -----										
1820, -----	44	40	1	4	1	11	8	4	11	27
1821, -----	46	46	1	2	3	10	8	12	10	28
1822, -----	64	50	0	0	5	17	8	6	14	42
1823, -----	73	61	1	2	2	19	11	6	20	54
1824, -----	53	56	0	1	5	14	5	8	23	51
1825, -----	59	56	2	4	8	8	3	10	21	44
1826, -----	47	46	0	1	5	14	5	1	20	55
1827, -----	58	56	1	0	5	6	2	8	33	57
1828, -----	77	65	3	0	5	12	12	10	24	68
1829, -----	73	77	1	1	9	19	12	9	26	65
1830, -----	82	78	0	2	10	6	8	18	34	69
1831, -----	83	84	0	2	8	16	15	13	30	68
1832, -----	94	08	1	0	10	14	9	21	43	64
1833, -----	103	100	0	2	8	10	25	13	42	67
1834, -----	107	95	0	0	7	6	15	26	41	80
1835, -----	83	84	1	0	11	7	11	9	45	77
1836, -----	106	112	0	0	10	24	5	9	64	71
1837, -----	120	106	3	0	8	8	4	10	72	86
1838, -----	138	131	2	0	12	13	7	23	74	03
1839, -----	132	117	0	0	10	13	11	11	69	108
1840, -----	155	138	0	0	13	18	20	12	75	125

In comparing the results of different periods in this table, it will be found that the recoveries have been in a much higher ratio of late years than during the early experience of the institution. This is to be explained in part, doubtless, by improved means of treatment, but principally from the class of cases admitted at the present day being much more favorable. Formerly, prejudice and distrust prevented patients from being sent to a public institution except as a last resort—when every other experiment had been tried without success. This feeling has been almost entirely dissipated in this community.

Another important fact in explaining this, at first sight remarkable difference, is that formerly patients were admitted without stipulation as to the length of time they should remain; of course they were often removed before any fair trial of remedial measures could be made. A clause in the bond for admission, requiring at least a three months' residence, if recovery does not sooner occur, has increased the pro-

portion of recoveries very much. Were it in our power to retain our subjects six months, or at discretion, many cases would be saved which are now sacrificed by premature removal. This advantage is secured in those institutions where, as at Worcester, South Boston, &c. the patients are received under legal process; their discharge then being dependent on a board of trustees, and not on their, often injudicious, friends.

At this asylum, during the five years it has been under my direction, the ratio of recoveries of all cases, old and recent, (and no case has ever been refused admission, however old, hopeless or exhausted,) has been rather over 60 per cent. This is a higher proportion, I apprehend, than will be found in the records of any other institution at home or abroad. Its explanation is doubtless to be looked for in the fact, that so well informed are our community in relation to the importance of early subjection to treatment, and so free from repulsive prejudices against a public institution, that no asylum could receive its inmates at a more favorable period of disease. Could we retain as perseveringly as we receive promptly, our results might be more happy still.

I find on examining our records in relation to the last topic of this inquiry, the number of suicides, that of the patients admitted prior to January 1, 1836, 1,206 in the whole, eight appear to have committed suicide. The cause of death in two is put down as "abstinence from food;" but whether these could be regarded as suicides or not, I can not determine. At that period, the mode of administering food by the stomach pipe, in cases of attempted starvation, had not been invented.

Since January, 1836, 770 patients have been admitted, making, with about 80 then in the house, a total of 850 patients; of these, a single person only has fallen a victim to a suicidal attempt, made almost in the presence of a vigilant attendant, and resulting in death from the previously entirely exhausted state of the patient, rather than from the severity of the attempt itself. Amidst a constantly recurring admission of patients with suicidal propensity, so extraordinary an exemption ought not to be expected for a series of years to come.

I might also mention in connection with this topic, that no case of injury beyond a mere scratch has ever been produced by one patient upon another, since I have been conversant with this institution.

5th. *What quantity of land is attached to the asylum, at what expense obtained, how and by whom is it cultivated? What the production annually? Is the quantity of land sufficient or more than is necessary or proper for the establishment?*

The original purchase comprised 15 acres, costing, with the centre mansion, \$15,000. In 1836, seven to eight acres, including a valuable wharf property, were added at an expense of \$7,000. The present season, 8 acres of merely agricultural land have been added at the cost of \$500 per acre, with the two-fold view of adding to the farm and preventing encroachment from an increasing population.

This last purchase was made at my urgent solicitation, having been

strongly impressed by observing how much suffering and inconvenience the institutions in the vicinity of the large cities of Europe have experienced from an originally inadequate supply of territory. A further quantity will doubtless be added here, at a favorable period.

The amount now under cultivation, after deducting space for buildings, yards, walks, flower gardens, &c. &c., can not, I think, exceed eighteen or twenty acres under cultivation. For some years, (of course without our late purchase,) the credit to the farm account, after being charged with all outlays, and credited with its produce, has exceeded \$1,500 per annum: yet the labor of our inmates is worth absolutely nothing. Mostly from classes in society unaccustomed to bodily labor, their services would be of little worth, if disposed to work. Placed here generally with a view to cure, and removed as soon as that end is gained, they are not in situations to be called on for labor; and paying us an equivalent for their support, we do not feel that we ought to require any exertion beyond what health, occupation of mind, and exercise require. Still, with the amount of manure produced from the waste of a household of two hundred persons, from thirty swine, seven cows, five horses, &c., we could keep much more land in profitable condition, as we have always a market for all kinds of garden vegetables, fruit, hay, potatoes, &c. &c., within our own premises.

In an establishment like the one at Utica, the patients might be employed in agricultural and mechanical labors, most advantageously for themselves, and to reduce their charge to the public. With patients from classes accustomed to bodily labor, especially those who have been acquitted by juries as insane, (who are often deranged on a few ideas only, not affecting their ability to judge and act on common matters,) an immense amount of useful labor is realized in asylums all over Europe, and as far as has been attempted, in this country.

6th and 7th. I beg leave to refer you to my two last annual reports for the replies to these interrogatories: *What amusements for the inmates, if any?* and, *What is the effect of labor or amusements?*

As the reports may not be in your possession, I transmit that for last year, by the same mail herewith.

8th. *How many insane and idiots in Massachusetts?*

I have no means of answering this question with any precision. I have seen the census returns of the various States, but should have very little confidence in them. I believe a pretty accurate approximation may be arrived at, by estimating one insane and idiotic person to every eight hundred of population. Some years since, when a member of the Legislature of New-Hampshire, my native State, I was one of a committee to collect the statistics of insanity in that State. Being small in territory and population, and much pains taken, we succeeded in obtaining as accurate returns as, I presume, are practicable on so difficult and delicate a subject. The result of them would corroborate the above ratio.

The proportion who would be proper subjects for an institution, or would be materially benefitted thereby, as regards prospects of restoration or amelioration, would be much less. In this Commonwealth, there are three public institutions: that at Worcester accommodating 230, this asylum 140, and that at South Boston 100; making a total of 470 patients. I apprehend that the wants of the State do not require any further extension.

9th. *How and by what authority are the inmates admitted to the asylum?*

There is no statutory provision in relation to the admission of insane patients to this asylum, other than that implied in the charter, which incorporates an institution "to receive sick and insane persons." Of course, the admission has been regulated solely by the by-laws of the trustees. Thus far, no difficulty has ever occurred; but there are a class of patients occasionally committed to the care of institutions, on the doubtful line separating soundness and responsibility, who are liable to occasion an institution, left in this uncertain state as to their legal rights, considerable trouble.

In a public institution like the Lunatic Asylum of New-York, it would seem as if the statutes, protecting alike the rights of the alleged lunatic and the authority of the asylum, both objects being essential to secure and perpetuate the public confidence, could not be too plain, explicit, and thorough.

Our trustees, after changes suggested by experience, have for many years received their patients under the forms which you will find appended to the report sent herewith, viz: a certificate of lunacy from a medical practitioner, a request from the friends most nearly concerned, and a bond for all payments of board, supplies furnished, removal, damages, &c. &c., to be signed by a responsible person, and guaranteed by another. Very little loss or trouble has ever occurred under this system.

The statutory provisions regulating the admission and discharge of patients to our State Lunatic Asylum at Worcester, have worked in some respects satisfactorily, and in others, so unequally and unjustly as to occasion much complaint from the public. The rights of the lunatic are well guarded; that is, it would be hardly possible for a sound man to be committed. But the words of the statute, authorizing the judges of probate to commit "persons so furiously mad as to be manifestly dangerous to the public to be at large," receive such a construction in actual practice, according to the understanding of applicants, often totally incompetent to discriminate on such a question, that you will find at Worcester, old, broken cases of dementia, which have had scarcely more than a vegetative existence for years, and even congenital idiots, committed under this statute; while the friends of a cool, calculating, and vindictive lunatic are refused his commitment, because they can not make oath that he is "*so furiously mad*," that is, so wild and outrageous, as to be "*manifestly dangerous*" to be at large! Some of the really most dangerous subjects I have ever had under my care, have been persons refused a commitment by the judge, because the friends

were scrupulous in taking this absurd oath. The error of the statute is, in presuming that class of lunatics to be the most dangerous, and the most fitting subjects for a hospital, who are so *furiously* mad as to be *manifestly* dangerous. In this county, for example, where the judge of probate is of average intelligence, at least, the admission or rejection of an application to the hospital depends on the views which the applicants may take of the elasticity of this affidavit.

When received under the commitment of the judge of probate, at the hospital at Worcester, the trustees have the power to dismiss the patient, as harmless and incurable, at their judgment and pleasure, so that he may be sent one week as furiously mad and dangerous to be at large, and returned as harmless the next. In fact, there are in every house of correction in our Commonwealth, subjects who are in rigid confinement, after having been dismissed from Worcester, as "harmless and incurable."

There are, in every insane hospital, those who may be offensive to propriety, disgusting, vociferous, incapable of preserving themselves from harm; yet they are harmless and incurable. When such are returned to their homes, or to country and town receptacles, perhaps to make room for others equally bad, much ill feeling is excited in the community; comments as to favoritism are made, and the remaining inmates are canvassed, with a view to determine if more fitting subjects are not rejected than some who are retained.

I am not prepared to suggest any remedy for all these inconveniences. It appears to me that if no attempt were made to define, exactly, the character and form of disease which should justify a commitment, there would be fewer inconsistencies in the practical operation. Perhaps a discretionary power, left to the judges or to commissioners, to decide in view of the evidence in each case, whether upon the whole the safety of the public and the individual would be promoted by his being placed in the hospital. I say the safety of the individual, for our statute will not sanction the most suicidal lunatic's committal, under a fair construction. Leaving out the words "*furiously*" and "*manifestly*," would be a decided improvement in the statute.

10th. *What is the average expense per week of supporting a lunatic?*

Our asylum is now principally occupied by those above the average, as respects social position. To do such the greatest amount of good, their artificial wants, as regards food, accommodations, attendance, diversions, &c., must be provided for with as much care as the actual necessities of life; of course the expenditures for such classes would form no criterion for the government of an institution like that at Worcester, or at Utica. As it is, however, the entire expenses of the establishment, averaged amongst the patients, will give about \$3.50 per week as the cost; nearly one half of which is from items of expenses which would not be called for, with a class of paupers, or of common laboring citizens.

11th. *What officers and servants, at what compensation, by whom paid, are attached to the asylum?*

All the officers receive their compensation from the common funds of the institution. They are as follows: Physician and superintendent, at \$1,500, with house, living, &c.; steward and matron, (jointly) \$1000, with house, &c.; assistant physician, \$700, with board; male supervisor, \$400; female supervisor, \$200; 1 carpenter, 1 fireman, 9 male attendants, each at \$180 per annum; 1 gardener, at \$20 per month; 1 sub-gardener, \$15; 1 porter, \$156 per annum; 1 baker, \$180 per annum; 1 coachman, \$160; 1 machinist, 1.75 per day; 8 female attendants, at \$120 per annum; 1 head cook, at 144; 6 assistant do., at \$84; 1 head washerwoman, \$96; 3 assistants, at \$90; 2 chambermaids, \$84.

I believe I have now answered the various inquiries of your letter. I am aware that many of the circumstances of a comparatively small institution like this, and one too where most of the inmates are admitted with the expectation of recovery, and not for custody merely, are not sufficiently analogous to your proposed institution to afford much instruction. The difference between our class of patients, as regards the hopes of friends, as to cure, or mere custody, as contrasted with our State Hospital, may be deduced from this fact, that with an average number of 140 patients only, we have as many new admissions per annum as that with an average of 230.

In reply to your wish for any suggestions not embraced within the range of your inquiries, I would venture to repeat the idea I mentioned, when I had the pleasure of seeing you here; that with the great number of patients (now in the places of confinement, and for whom application will be made) it would be peculiarly desirable that some power of selection of the cases most proper, and most promising, should exist, and that some more competent judge on these points than those to whom it would naturally fall, should receive evidence, either personally or otherwise, and discriminate as to the suitableness of those now in confinement. Receiving old cases of dementia, paralysis, &c., who can neither be restored, essentially ameliorated, or useful to the institution, by their services, will involve the necessity of sending them back as soon as more urgent cases are sent; for your present accommodations cannot receive one quarter of the really suitable objects, to say nothing of others who will be forced into, if possible. Now this returning of patients as harmless and incurable throws much odium upon the direction of an asylum. A class of patients, gathered with some view to their capability of rewarding, by their improvement, the cares bestowed upon them would, by their recoveries, their amelioration, where cure was hopeless, their happiness, their healthful condition, their amount of self-supporting labor, tell such a story in behalf of the institution as to commend it to the good will of every citizen of the State, and render its future extension acceptable to the public. I am aware that there may be practical difficulties in carrying out this view, and merely suggest it for your consideration.

I would also venture to repeat my idea of the importance of an explicit division of powers amongst those having the immediate charge of the institution. Most of the troubles which have, in former years, occurred in this asylum, at those at Hartford and Bloomingdale arose from a clashing in authority between the medical head and the steward, or warden. The true principle, I apprehend, is to be found in the system verified by the experience of the several institutions of this commonwealth, that of giving one man the power, (under the oversight of the managers) and charging him with the responsibility of the whole establishment.

I remain very respectfully yours,

LUTHER V. BELL,

Phys. and Sup. of the McLean Asylum.

Charleston, Mass., Oct. 7, 1841.

(2.) *Extracts from the 23d Annual Report of the Physician and Superintendent (Dr. L. V. BELL) of the McLean Asylum for the Insane, at Charlestown, near Boston, Massachusetts, 1841.*

	Males.	Females.	Total.
"The entire number of insane patients under the care of the asylum, during the year 1840, has been	143	120	263
Of whom there remained at the beginning of the year,	62	46	108
And have been received to Dec. 31,	81	74	155

"The general results of the institution as contrasted with the preceding five years, are presented in the following table :

YEAR.	No. admitted.	No. discharged.	Whole No. under care.	Died.	Not improved.	Improved.	Much improved	Recovered.	Remaining.
1835,.....	83	84	163	11	7	11	9	45	77
1836,.....	106	112	183	10	24	5	9	64	71
1837,.....	120	105	191	8	8	4	10	72	86
1838,.....	138	131	224	12	13	7	23	74	93
1839,.....	132	117	225	10	13	11	11	69	108
1840,.....	155	138	263	13	18	20	12	75	125

"The ratio of recoveries and of deaths in those discharged, and of deaths in the whole number of those under the care of the asylum, as continued from the table published in the last annual report, is as follows :

YEAR.	Per cent of recoveries.	Per cent. of deaths of discharged.	Per cent. of deaths of all under care.
1835,	53.5	13.0	6.1
1836,	57.1	8.9	5.5
1837,	68.6	7.6	4.2
1838,	56.4	9.1	5.4
1839,	59.0	8.5	4.4
1840,	54.3	9.4	5.0

"From these statistics it appears, that during the four years of the direction of its present superintendent, the proportion of recoveries of all cases old and recent, without allowance for those proving "unfit" or not proper subjects, or those who have died under care, or those who have been prematurely removed before the event was known, has been about sixty in the hundred, and the proportion of deaths between four and five in the hundred."

"The records of this asylum justify the declaration that *all cases certainly recent*, that is, whose origin does not either directly or obscurely run back more than a year, *recover under a fair trial*. This is the general law; the occasional instances to the contrary are the exception."

ON THE ENTIRE DISUSE OF CORPOREAL RESTRAINTS.

"An absence in the early part of the year of about four months in search of health, under permission of your board—a permission granted in a manner, and accompanied with circumstances calling for his grateful acknowledgments—gave your superintendent some opportunity to observe and compare, and if occasion had offered, to improve by the long established and extensive insane institutions of the old world. While surprised and gratified at the extent and magnificence of many of these establishments, there seemed little or nothing in architectural arrangements, or in modes of moral or medical treatment of value, which has not long since been transplanted to or discovered in the American institutions. The only noticeable peculiarity worth communicating would seem to be, the experiment commenced recently in some of the British hospitals, of an entire disuse as they consider it, of corporeal restraints. At the Lincoln Lunatic Asylum, it is said in the report of the Middlesex Asylum, at Hanwell, for 1839, that the last personal restraint occurred in January, 1837, and at the last mentioned institution, restraining apparatus has been thrown aside since the latter part of September, 1839. I consider one of the greatest pleasures of my visit to Europe to have been the privilege of spending the greater portion of a day at Hanwell, and the opportunity of conversing freely on this, as well as other subjects relating to the insane, with Dr. Conolly, the head of this extensive establishment, whose reputation as a medical

philosopher and writer on mental alienation, is no less recognized on this side the Atlantic than at home, and whose urbanity and attention to a stranger, with no claims beyond a community of interests and pursuit, I can not but gratefully recall. As any thing like improvement in the present system, introduced elsewhere, must soon attract attention here, and as the idea of absolutely discarding personal restraint has something so attractive in its very mention, I have been induced to bestow considerable reflection upon the expediency of adopting such a universal rule at this asylum. Thus far, at these two great institutions referred to, the former with about one hundred and fifty, and the latter with over eight hundred patients, the experiment has been found so successful as to be persevered in ; whether adopted beyond these hospitals or not I have no means of ascertaining. It is certain however, that the attempt has been much noticed and applauded in England, and of course will soon have its praises transferred to every portion of our land.

“As regards Great Britain, the encomiums bestowed upon this innovation may be all deserved ;—in a country where at this moment *a chain* to each bed of at least one long dormitory may be seen at the extensive metropolitan hospital of St. Luke, such a discovery as puts an end to such barbarity may well excite applause ; or at the Lincoln Asylum, where the number of patients under restraint were 39 of an entire number of 72, in 1830 ; 54 of 92, in 1831 ; 40 of 70, in 1832 ; 55 of 81, in 1833 ; 44 of 87, in 1834, and so on, the change must be most gratifying to every humane heart.

“Dr. Conolly in ‘The Fifty-first Report of the Visiting Justices of the County Lunatic Asylum at Hanwell,’ for the year 1839, (page 47,) remarks as follows : ‘For patients who take off or destroy their clothes, strong dresses are provided, *secured round the waist by a leathern belt, fastened by a small lock.* For some who destroy the collar and cuffs of their dresses with their teeth, a leathern binding to those parts of the dress is found convenient. *Varied contrivances* are adopted with variable results, *for keeping clothing on* those who would otherwise expose themselves to cold at night ; and warm boots *fastened round the ankles by a small lock* instead of a button or buckle, are sometimes the means of protecting the feet of those *who will not lie down.* * * * *Those who are in the habit of striking suddenly, tearing the bedclothes, &c.* sometimes wear a dress of which the sleeves terminate in a *stuffed glove without a division for the thumb and fingers.* But no form of strait waistcoat, no handstraps, no leglocks, nor any contrivance confining the trunk or limbs, or any of the muscles, is now in use. The coercion chairs, about forty in number, have been altogether removed from the wards ; no chair of this kind has been used for the purpose of restraint since the middle of August.’

“Any gentlemen familiar with the management of this, or I believe any other of the New-England institutions from their origin, will at once declare, if this is all that is meant by an absolute disuse of restraining means—if the application of leathern mittens, waist straps, varied contrivances for keeping on clothing, boots with locks, &c. are considered so mild and trifling measures, as not to be included under

the phrase of *personal restraint*, that this innovation or experiment or improvement can never be introduced here, for the best of all reasons, that the application of the severe measures reported as discarded at Hanwell, never was heard of in our asylums, and but a few even of the measures deemed so insignificant as to form no exception, have ever been found necessary here. If this is all that is intended in the new system, our experience for years may encourage them to go on fearlessly.

"An amount of restraint less than is intimated in these exceptions, has long proved adequate in this institution; the necessity, for example, of restraining apparatus for keeping the patient covered at night, is here obviated by the admission of heated air to the sleeping apartment when necessary. For some years the average number of patients under the restraint of leathern mittens, has not exceeded one per cent, and often week after week elapses without even a single instance.

I have no doubt that this rare use might with safety be carried to a still greater extent—to that of absolute interdiction, but how far it may be dispensed with, or how far the best good of the sufferer demands its application, is a question of judgment to be decided in view of all the circumstances of each case. An important rule is, that *no restraint, even of the slightest kind, should ever be applied or removed except under the direction of an officer*. This rule has always been incorporated in our code of domestic regulations. But to lay down the broad absolute rule of disusing all the mild forms of restraint, would not comport with the best good of an institution. I do not doubt that with the number of active and trusty assistants we now have, it might be practicable to pursue such a system, perhaps without any results of consequence to be regretted. Yet its adoption would be cutting off the power of employing a remedial means often of great value to the patient. A portion of the feeling in England as to restraining measures, is based on a delusion. Which is the greater restraint, to shut up a patient disposed to strike upon any sudden impulse, in his solitary dormitory, having its light admitted just below the ceiling, or to place large leathern mittens on his hands, and permit him to go into a large court-yard and to walk up and down in the open air? The seclusion within a room is not considered *personal restraint*, in the reports referred to.

Or which is least oppressive to a patient disposed to certain troublesome habits, as abrading the skin of the face by perpetual picking, or by plucking out the hair root after root—habits become from neglect so inveterate and involuntary, that even while the physician is dissuading or promising restraint, his hand unconsciously returns to its wonted act—to place the hands in a muff of leather, at once simple, free from pain and effective, or to trust to the vigilance or the eventually annoying and irritating reminders or restraints of an assistant? Who can doubt as to the comparative advantage of personal restraint from the hands of attendants or of apparatus, in those cases of delirium-like fury, where the sufferer is constantly endeavoring to rise from his bed, and where the presence of faces around him is associated in his blind frenzy with enemies to be contended with, regardless of their numbers. The mind may be in that state where the most soothing attentions are met only

with fury and suspicion. How valuable in such a case is the beautiful and simple apparatus, constructed I believe by my distinguished predecessor, Dr. Wyman, which holds the sufferer gently in his position on his bed, allowing him almost every natural and proper movement, yet prevents his wearing himself out by constant efforts to rise, and allows every person to leave his immediate apartment, (for his disordered fancy makes cruel enemies of all,) with a certainty that he is safe and comfortable!

Again, in some highly active forms of the suicidal propensity, where no human vigilance can prevent the consummation of the dreadful act, except accompanied by the ceaseless application of the force of several persons, a proper restraining means such as the leathern muff, at once allays the violence of the propensity, by showing the patient that he need not be on the watch to elude his attendants, and that attempts are vain to accomplish his design by force. The best proof of the value of the occasional use of this and other means of vigilance, is manifested in the extraordinary fact, that of the more than six hundred and fifty patients admitted within the last five years, amounting to more than one-third of all the inmates during the twenty-three years of the existence of this institution, a single individual only has committed suicide! I can not here forbear to refer to this remarkable result, as one redounding to the honor of the male and female supervisors, and entitling them in the highest degree to the obligations of the community, for to them necessarily appertains to a great extent the merit of a prompt detection, often no easy matter, and a successful prevention of this sad accident. This result will be duly appreciated when it is considered that the number of those evincing this propensity has sometimes amounted to a dozen, and I have never known the period when no instance existed. I recall also from memory no less than three instances within as many years, where patients have returned home upon partial convalescence or from other motives, and resorted almost immediately to the fatal act successfully, although the friends and relatives were forewarned to exert their utmost vigilance by our experience.

(3.) EXTRACTS FROM DR. BELL'S ANNUAL REPORT, FOR 1839.

On the admission of a patient, our first care is to have the accompanying friends communicate to the individual in our presence, if this has not been previously done as it should be, where he is, that he is brought here as a deranged person, that his stay will depend on the judgment of the physician as to his recovery, and he is made to understand that the extent of his privileges will necessarily be dependent on his ability to comply with the rules, and to control himself, and that the more he obtains the confidence of those under whose care he is, the less will be the necessity of any restrictive measures, and the wider will be his power of directing his own movements. However well he may appear or however incoherent, this communication is substantially made to him, and no false representations are permitted from this time henceforward in our intercourse with him. If he is bound, his straight waistcoat or other restraining apparatus is removed, and he is made sensible that if

he conducts himself so as to avoid the necessity of any restraint, that he will be treated accordingly.

His person and clothing are then put in entire order, and even unusual pains in this particular are often abundantly repaid by the self-respect and self-control which he exerts when he finds that he is treated with respect and attention. The manner of address to him is always such as shows him that we consider him capable of conducting like a gentleman, and shall be surprised if he does not. He is usually placed at first in an intermediate gallery between the highest and the lowest, introduced to his fellow patients and the attendant who is to have the immediate care of him.

The construction of the asylum is such as admits a more entire and favorable classification of patients, than of any institution of which I have seen the plans or the interior. We can so distribute our inmates as to make more than a dozen distinct separate families of each sex, as wholly divided and removed from each other as can be desired. These families or classes have their proper sitting rooms, sleeping and dining apartments, bathing rooms, &c. and meet each other only as far as is approved, at prayers, certain kinds of employments, sometimes at reunions and amusements when it is deemed expedient. In each successive grade the indulgencies and privileges, as regards society, furniture, books, care of their own clothing and in fact any thing evincing confidence in their improvement and character, are correspondingly augmented so as to render a successful endeavor to act rationally and properly, sure to be rewarded in a way which is felt and acknowledged. The importance of classification can not be overrated. It is the successful use of the means put into our hands in the extensive architectural arrangements here provided, that has enabled us to dispense almost entirely with restraining measures or even rigid confinement, as evinced in the fact that our lodge or strong rooms are not called into use more than three or four times during the year; that not one per cent of our whole number is on an average under any constraint, even that of confining the hands with the mittens, and that we rarely have a patient who does not sit at table with the others and eat with knife and fork. There are, it is true, certain cases where the mind is so frenzied and chaotic, that the individual is reckless and unconscious of what he does; here the provision of a suitable lodge room with stone floor warmed by steam or hot air below, without glass or moveable furniture, is the best and kindest appliance, which can be adopted for a few days until medical and soothing treatment can place the sufferer in a condition to be operated upon by moral means. We never have had occasion since the institution has been under my care to use strong rooms as places of permanent detention, a few weeks being the extent of time which they ever have been occupied by a single person. If there are patients so uniformly and permanently furiously excited or irremediably filthy, as to require constant confinement in lodges, they have not yet fallen within my experience.

I have remarked that the patient on his reception was put under the immediate and constant care of an attendant. The importance of securing the services of an elevated, respectable and cultivated class of

persons for the responsible duty of attending upon the insane, was early recognized in this institution, and it has always been deemed an object to obtain which, no trouble or cost was to be spared. We have never been obliged to feel the want, which most writers on insanity and many institutions so feelingly deplore, of a proper kind of assistants. There are in the interior of New-England a class of young men and women of respectable families, adequate education, and refined moral feeling who are willing to devote themselves for a few years to this calling, under the encouragement which is offered them of a fair pecuniary recompense, and what is a still higher inducement, that of knowing that their services are deemed of a highly respectable character. We never employ those in whom we would not place implicit confidence.

The facilities for keeping every moment occupied are various. A farm, a highly cultivated garden, a nursery of fruit and ornamental trees, a carpenter's shop, a more detailed account of which will be presently given, the sawing, splitting, and piling of wood, a bowling alley, a billiard table for each sex, chess, cards, draughts, newspapers, drawing and surveying materials, a well adapted library, five or six horses and carriages, musical instruments and other modes of labor or amusement which particular tastes may dictate.

The extent of indulgence of liberty varies with the character and degree of disease from the restricted walk in the courtyard, by the side of an intendant, to a visit on parol to the lecture rooms or public meetings of the city with unlimited confidence. The general number of attendants is about one to every four or five patients, independent of particular cases, when from a suicidal propensity or other adequate cause, the whole services of an attendant are devoted to a single person.

This number of assistants admits of very great liberty of movement to be given, and the many places and scenes of interest, with which this region is covered, gives scope to a never ceasing round of agreeable walks. The periodical reunions of the female patients in their sewing circle, and the occasional dancing parties at which patients of both sexes who are well enough, with their attendants, enjoy an hour or two in this innocent amusement, have been described in former reports.

DIRECTIONS FOR THE FRIENDS OF PATIENTS.

It is desired that no case (unless certainly of the most recent duration) should be sent to the institution, unless it is determined and arrangements made, to afford a fair trial. No time short of six months can justly be considered a fair trial, and to place a patient afflicted for many months here with the determination to remove him at the expiration of a single quarter, is an injustice to the asylum, and to the general cause of the insane.

It is presumed that the friends and guardians of every patient placed here, are satisfied that they can rely upon the skill, kindness and integrity with which he will be treated, and that they can do no better with their charge. Having arrived at this conclusion, as they should do before committing their friend to its care, it will be recollected as part of

the covenant, that the discretion of the superintendent is to decide in every case upon the patient's being seen by friends, or acquaintances or strangers, or visits being absolutely interdicted.

The friends of the insane should be honest in their dealings with them in relation to their admission here. Let the patient understand where he is to be placed, and the reason—that his seeing them will depend upon circumstances—let no deception be employed nor the responsibility of deciding whether he had better stay or whether he can be relieved, &c. be thrown upon the institution, as is frequently attempted.

(4.) *Letter from Dr. S. B. Woodward, Superintendent of the Massachusetts State Lunatic Hospital, to the President of the New-York State Lunatic Asylum.*

STATE LUNATIC HOSPITAL, }
Worcester, Sept. 18, 1841. }

Hon. DAVID RUSSELL:

Dear Sir—Your letter of the 13th came to hand yesterday. I take the earliest opportunity to reply to your inquiries:

1st. The time of the establishment of the State Lunatic Hospital in Massachusetts was March 10, 1830, when a resolve that had passed the Legislature received the signature of the Governor. The first movement for the purpose was made in the session of 1829, and a committee appointed to consider the subject, collect facts and information and report to the next session. The first appropriation was made at the time of the establishment of the hospital, and was \$30,000 for the erection of the building. Three commissioners were appointed to select a site and erect the building.

2nd. Was the hospital designed for the *insane poor* only? It was not. The first class of patients to be accommodated was "the furiously *mad* and those *dangerous* to go at large." This class can be sent to the hospital by the judges of probate in the several districts, and the higher courts, if persons arraigned for crimes are found insane. Next to this class, the *insane poor* can be committed by the overseers of the poor, on permission of the trustees, to whom application must be made. If there is still room for more patients after these two classes have been accommodated, the trustees authorize the superintendent to receive private boarders, (insane persons only,) to remain while there is room, and liable to removal whenever the room occupied by them shall be required by patients of the other classes.

3d. The hospital buildings are the main building, the chapel, lodge for violent men, two infirmaries for the sick, (one for each sex,) a wash room, two store rooms, a shoemaker's and a carpenter's shop.

The hospital building originally erected is 256 feet long; consists of a centre building, 76 feet in front and 56 feet in rear; and two wings, 90 feet front and 100 feet rear. In the centre building are the rooms for the accommodation of the superintendent, steward and help of the household, and the kitchen and dining rooms for the patients. In this centre building are 21 rooms, besides six dining rooms for patients. The wings have each 58 rooms, three of which are appropriated to the

attendants of the three galleries, and three to the water closets, washing and bathing rooms for the galleries.

These rooms for patients are 10 by 9 feet, and 9 feet high; the halls 12 feet wide. The wings well ventilated, and easily and effectually warmed by warm air furnaces in the basement; so that no patient is exposed to fire or any means of being burned. The whole structure of this building is of brick, the walls hollow; the windows secured by an iron sash, making it a safe and suitable residence for the insane, affording every desirable facility for their treatment; and, since the additions have been made, affords every desirable facility for classification. This building, the lodge for violent men, the working and washing apparatus, the barn and other out buildings, with all the furniture for the accommodation of the family and patients (113 in number,) costs a few dollars more than \$50,000. As 20,000 dollars were appropriated, March 24, 1832, to complete and furnish the establishment, on the final settlement of the commissioners' account, a small sum, less than \$500, was found due to them beyond these appropriations.

In the year 1836, one lateral wing was added, 100 feet long and 34 feet wide, with a piazza in front, in the angle, making a pleasant room, 34 feet square, for airing and exercise. The next year, another wing, corresponding with the first, was put upon the other side. These two last wings added 116 rooms for patients, lodging rooms, two kitchens, three dining rooms and three attendants' rooms in each wing, besides lodging rooms for help under the porticoes. The appropriation for the erection and furnishing these wings with cooking range and means of warming and ventilation, was 35,000 dollars.

In 1837, a chapel was built which cost 3,000 dollars; and in 1838, two infirmaries for the sick, 50 feet by 20, were erected contiguous to each wing, at an expense of 2,500 dollars.

The farm which, with the gardens, consists of about 65 acres of choice land, costs about 8,000 dollars.

The whole expense of the establishment has been, in round numbers :

For the first building,	\$30,000
Furnishing the same, means of warming, wash and store rooms, barn and out houses, &c. . .	20,000
Wings and piazzas, furnishing, &c.	35,000
Chapel, infirmaries, land, &c.	13,500
	<hr/>
	\$98,500
	<hr/>

To these items may be added, aqueducts a mile in length, a cistern, holding 20 thousand gallons of water, an ice house, mechanics' shops, and the whole expenditure will be something rising of 100,000 dollars, and not varying 500 dollars from that sum.

4th. Number of patients in the Hospital.—At this time there are 237 patients in the hospital; 115 males, and 122 females; 210 incurable cases, and 27 that have a prospect, more or less favorable, of recovery.

There have been in the hospital since its commencement, 1,321 patients ; and there have been discharged and died, 1,084. Died, 98 ; recovered, 568. In the 8th report of the hospital, page 38, there is a table of statistics which will give much information on the subject, to which I refer you.

5th. Land and cultivation.—The farm and gardens consist of about 65 acres of land ; about 6 acres are cultivated with garden vegetables, in the best manner, and are very productive. About 90 per cent of the labor is performed by the patients ; and the quantity of roots for the table and for stock, amounts annually to near 2,000 bushels. A large proportion of the patients labor on the farm, in shops, and on wood. Sufficient hay is cut to keep 10 cows, a yoke of oxen and three horses ; nearly all of which is mowed and made by the patients of the hospital. We have a fine herd of swine, upwards of 30 in number, to which the patients give much attention. We also raise corn, potatoes, oats, &c. in the field by the labor of the patients, united with the farmer of the establishment, who directs and plans the business. Nursery improvements are also made every year by the same labor.

6th. Amusements, &c.

The females ride daily, take long walks, play at games, have parties, dance, and spend most of their time in useful, profitable and agreeable labor. Of 122 females in the establishment, more than 100 perform some labor, and a large proportion of them work regularly every day.

The men, in somewhat less proportion, work, some in the garden, shops, on the farm, on wood and improvements. Take long walks, dance, play at games. All read more or less, that are capable of understanding what they read. Three-quarters of both sexes attend the chapel exercises twice on each Sabbath, but not quite that number daily.

7th. The effect of labor and amusements we consider very favourable on all classes of patients, and particularly on the convalescent. They promote sleep, improve the strength and appetite of patients, and contribute greatly to cheerfulness and contentment.

I have thus, I fear, imperfectly attended to your inquiries, and answered them as well as I am able, amidst the multitude of interruptions that constantly assail me. I shall be happy at any time to answer any other questions which you may propose, in the best manner I am able.

We have three modes of admission to the hospital. The dangerous insane are admitted by the probate courts ; the criminal insane, excused from punishment by reason of insanity, are sent by the higher courts ; and the overseers of the poor of the towns, by the consent of the trustees, commit the paupers not dangerous.

By an arrangement of the trustees, the superintendent has the liberty of admitting *private boarders*, when there is room for their accommodation.

The patients are discharged, if recovered, by any two of the trustees ; if harmless and incurable, by a majority of the trustees ; and if

dangerous and incurable, by the judge of probate for the district of Worcester. The higher courts discharge also, the cases in which "the cause of commitment has ceased to exist."

The charge for board at this hospital, is \$2.50 the week; in some cases, a moderate allowance is given for labor, but not often—in recent cases, the charge is sometimes reduced to \$2.00, and sometimes to \$1.50.

The trustees nominate the superintendent, and the Governor and Council approve the nomination. The same is true of the assistant-physician, steward and matron. The salaries of these officers are paid from the State treasury. The superintendent has 1,800 dollars in cash, and the support of his family, furniture, fuel, lights, &c. The assistant physician has 700 dollars, with his individual support; and the steward and matron \$700, with the same perquisites.

The whole responsibility of the management of the internal concerns of the hospital is on the superintendent; no bill of the steward is paid by the treasurer unless it be endorsed by him. He directs as to the employment and discharge of the help, &c.

Our chaplain has 625 dollars per annum and performs no duty except to attend to the religious services of the Sabbath. We pay attendants in the male departments, fourteen dollars a month the first year, and fifteen the subsequent period of employment. Females have from \$1.50 to \$3.00 a week, attendants on patients receive \$2.00 a week invariably. We have 16 men employed in the various departments of labor, as attendants and assistants, farmers, watchmen, overseer of shoe shop, &c. and 25 women including cooks, washers, tailoresses, mantua makers, waiters, ironers, chamber and table girls. At the end of the year if the help perform their various duties to the acceptance of the officers, they receive a gratuity, the men 8 dollars and the women 5 dollars per year.

The whole expense of the hospital annually, independent of the salaries of the four officers above named, is not far from 28,000 dollars, most of which sum is paid by the friends of the patients and by towns.

The appropriation by the Legislature has varied from 5 to 8000 dollars annually, till 1839, when 8000 dollars, were appropriated, at the end of the year, six thousand dollars remained. In 1840, there was no appropriation made; at the end of the year 1840, 4000 dollars of this sum remained in the treasury, and is at this time (Sept. 20,) unexpended. The money collected from individuals and towns annually, for the last three years, has been from 24 to 26,000 dollars. Improvements are constantly going on in such institutions, that costs money; and those of a permanent character, and of any considerable magnitude, have been recommended to the Legislature by a committee, which visits us annually, during the session, and specific appropriations have been made for the object. Such as erecting the chapel, and the infirmaries purchasing land, &c.

At this establishment the lodges or rooms for violent patients, are too near the hospital building (about 80 feet distant,) they should have been 150 or 200 feet distant. They should have been two stories

high, the basements for the violent, and the upper story for the imbecile, and such as are idiotic and filthy. There should be connected with them an apartment for an attendant, who should have the charge of them.

I suggested to some of your trustees, when here, the propriety of having a neat little church in the centre of your grounds for the accommodation of such of the patients and family as desire to attend religious worship on the Sabbath. The expense would be small and the effect fine, in my opinion. Your large attick room, will be useful for many purposes, particularly for parties, balls, and if you please, for the tailoress, mantuamaker and other seamstresses ; but it can never be convenient for a chapel, and never can have felt towards it the respect and reverence which is desired to-wards a place of religious worship.

It will be difficult of access, make much confusion and noise in the centre building, going and coming from religious service.

You will need a superintending physician, assistant physician, steward and matron. And when your whole establishment is completed, one physician to each building, and a general superintendent and counsellor, who shall govern the whole. An apothecary with each physician, in each building, would be all the aid he would need, and this apothecary would be able to spend much time with the patients, advise and direct their amusements, &c.

The treasurer of this hospital is appointed by the State. He collects all the moneys due ; this enables the steward to devote himself much to the patients, as well as to procure the supplies and pay the bills. No bill is paid till endorsed by the superintendent.

I have doubtless, my dear sir, gone into much unnecessary detail and perhaps have neglected much that is of importance. You will excuse the first, and the last I will supply with great pleasure, when I know what it is, if I am able to do it.

I have felt a deep interest in your noble charity since its commencement, and shall be most happy to aid what little I can in giving it at first, a right direction. With my best wishes for your personal welfare, and the success of your magnificent undertaking,

I am yours truly,

S. B. WOODWARD.

(5.) *Extracts from the 8th Report of the STATE LUNATIC ASYLUM at Worcester, in Massachusetts : Dec. 1840.*

"On the first day of December, the trustees went through the hospital thoroughly. The examination was highly satisfactory. The patients were very quiet—all of them clean and comfortable—and a large proportion of them appeared happy. The interesting report and statistical tables, prepared by Dr. Woodward, and herewith annexed, present so accurate a view of the present state of the hospital, that the trustees will give only a general outline. There have been in the hospital in the course of the year, 391 patients ; 190 males, 201 females. There have been admitted 162 ; 75 males, 87 females. There remained at the end of the year, 236 patients ; 122 males, 114 females.

Of which, 208 are old cases, and 28 recent cases; 105 cases have been sent by the courts, 48 by friends, and 9 by overseers of the poor. There have been 30 foreigners, and 19 persons belonging to other States, in the hospital the past year. There have been applications not received, 99; 58 of which were citizens of this State. There have been discharged from the hospital during the year, 155 persons; 82 of which were recovered, 29 improved, 29 discharged for want of room or harmless, 15 have died. Of the 82 recovered, 64 were recent cases, and 18 old cases; the whole number of recent cases discharged is 70. The per cent of recoveries of the recent cases discharged, is $91\frac{1}{2}$ per cent; the per cent of all the cases discharged, is about 53 per cent. The striking difference in the per centage of recoveries between recent and old cases, is shown in a very interesting light in Dr. Woodward's Report, and is a fact of vast practical importance, which cannot be too often, nor too strongly pointed out to the public eye.

"The labor department has been continued the past year with increased evidences of its utility. The produce of the farm is estimated at \$1,887.89, exclusive of the fine live stock on hand. The value of shoes manufactured is about \$900. A great amount of useful labor is daily performed by the patients in the house and about the premises; and during the year extensive improvements have been made, and the grove has been ornamented with paths and walks, and the surface made smooth and beautiful. But the true value of labor is to be estimated by a higher standard than money. Labor is the health of the mind. It is that power in man which unfolds and directs his capacities, and thus reveals and secures the sources of his happiness. The man who labors, shares first and largest in the fruits of his own toil, for, in every condition of human life, useful employment is the surest enjoyment, the best security of a "*sound mind in a sound body*." In a disordered state of mind, judicious occupation is among the best remedies, and agricultural and horticultural occupations are among the best of all. '*Grain and fruit are God's bounty, the flowers are his smiles.*' This beautiful thought of the poet may come over the troubled mind when engaged in the field or the garden, in the midst of Heaven's gifts, with a divine power to dispel gloom, and infuse hope, and peace and joy. The experiment of cultivating the gardens, and tilling the soil by the patients, has proved so beneficial to them, that the trustees regard it as true humane economy to purchase more land adjoining the hospital farm, whenever favorable opportunities may offer."

"The cost of supporting the hospital for 1840, \$27,844.98, divided by the average number of patients, 229, gives as the cost of supporting each patient, a fraction less than \$2.33 per week. This is something less than the present charge. But as there is some uncertainty in regard to the future price of supplies,—as great inconvenience has been experienced on account of the crowded state of the hospital, and as the present price of board is so very reasonable,—the trustees have decided to continue the same price of \$2.50 per week for each

patient for the coming year; except in cases in which for special reasons it is enlarged or abated.

"Religious services have been regularly performed on the Sabbath in the chapel, during the past year, with gratifying confirmation of the good effect of public worship on the patients. The same blessed influences of Christianity which, in the days of its divine author, brought quietly to his feet, '*sitting and clothed in his right mind*,' the wild maniac, who had '*plucked asunder his chains, and was always, night and day, in the mountains, crying and cutting himself with stones, and no man could tame him*;'—this same blessed religion of love and mercy, by the labors of its faithful ministers, still continues to exert its healing and soothing power over the troubled soul."

(6.) *Extracts from the Superintendent, Dr. Saml. B. Woodward's Report of the WORCESTER STATE LUNATIC ASYLUM: Dec. 1840.*

"In the State Lunatic Hospital for the *eight* years which we now report, we have received *eleven hundred and ninety-six* patients; of whom *five hundred and six* have recovered, *forty-two and three-tenths* per cent; *ninety* have died, which is about *seven and one-half* per cent.

"The average recovery in *thirteen* British institutions, is *thirty-seven and five-tenths* per cent, and the average deaths *twenty-seven and three-tenths*, as appears from the following table, taken from a work recently published in London, by Dr. Crowther, giving the per cent of recoveries and deaths in thirteen public institutions in that kingdom.

	Years.	Admitted.	Recovered.	Per cent of recoveries.	Died.	Per cent of deaths.
Bedford,	5	191	61	31.9	29	15.1
Cheshire,	5	209	87	41.6	44	21.0
Cornwall,	5	175	80	45.7	34	19.4
Dorset,	4	145	41	28.2	15	10.3
Gloucester,	5	268	156	58.2	25	9.3
Kent,	3	254	35	13.8	45	18.8
Lancaster,	5	779	301	38.6	396	50.8
Middlesex,	5	1183	181	15.3	326	27.5
Norfolk,	5	293	127	43.3	135	46.0
Nottingham,	5	274	100	36.0	42	15.3
Stafford,	5	634	295	46.6	110	17.3
Suffolk,	5	362	167	46.1	104	28.7
West-Riding, ...	5	709	303	42.7	257	36.2

Natives of other States,			
Males,	12		
Females,	7		
	—	19	49
Patients now in the hospital,			236
Males,	122		
Females,	114		
	—	236	
Cases of less duration than one year,			28
Males,	14		
Females,	14		
	—	28	
Cases of longer duration than one year,			208
Males,	107		
Females,	101		
	—	208	
Applications not received,			99
From this State,			58
Males,	29		
Females,	29		
	—	58	
From other States,			41
Males,	21		
Females,	20		
	—	41	
		—	99

CHAPEL AND RELIGIOUS SERVICES.

"We have now had regular religious worship on the Sabbath, for more than *three* years. In the course of that time, nearly *six hundred* patients have attended meetings more or less, and less than *ninety* have been in the hospital who have failed to attend.

"Our expectations of benefit from the chapel have been more than realized. From *one hundred and twenty* to *one hundred and fifty* patients assemble on each Sabbath, and no congregation is more orderly and attentive. There is a solemnity visible in the countenances of those present, which clearly indicates that they know for what purpose they have come together; and even those who are at first disposed to be restless and disorderly, catch the influence which is every where prevalent around them, and become calm and sober themselves.

"The instances of self-control, manifested in the chapel, by those who are often greatly excited, restless and noisy in the halls, are truly remarkable.

"The Sabbath previous to the day on which this sheet was written, a woman, who had been greatly excited, very profane and noisy, requested to attend chapel. All efforts at self-control, while in the halls, were unavailing, except for a few moments at a time; she would promise to be quiet, but, in a moment, be as noisy and talkative as before. Knowing, however, her reverence for the Sabbath, and the

strength and sincerity of her resolutions to be quiet, she was permitted to attend. The most careful observer would not have been able to detect any thing in her appearance and conduct, that would distinguish her from the most rational and dignified person in the house.

"During the evening previous to the same Sabbath, a patient, furiously mad, was brought to the hospital in the care of a sheriff. He had been considered quite dangerous, and the sheriff hesitated whether it would be safe to come with him unless he was confined in irons: he appeared calm on the following morning, and it was proposed that he should attend chapel; he seemed pleased with the privilege, attended the service all day, and conducted with the utmost propriety. These occurrences, which were of yesterday, are happening almost every Sabbath, and show most clearly the propriety and importance of religious worship to the insane.

"The truth is, that many insane persons are rational on religious subjects, and a few are insane on these subjects only. Both classes are often benefitted by religious instruction.

"It is through the healthy avenues of the mind that religious truth is received, and makes its impression upon the feelings. On most subjects, the insane can reason, and feel the force of reasoning, as well as others; and, even if insane on religious subjects, plain and forcible illustrations of truth may weaken their confidence in insane impressions, and throw light where darkness only has been prevalent.

"The habits of New-England people require order and decorum in the place and time of religious worship. The insane feel the force of this habit equally strong; they frown upon those who work or trifle upon the Sabbath, and are particularly indignant to those who are disposed to disturb the quiet of our religious assemblies. There is a feeling of pride extending over our whole household, in the quiet and orderly observance of the Sabbath in the hospital. The good counsels of the chaplain are treasured up, and often repeated in the week time, as motives of self-control to themselves, and as admonitions to others.

"*Pledges.*—We think much of pledges with the insane, and often avoid restraints, by taking the word of a violent patient to be quiet and peaceable. Even the suicidal, who have been detected in making preparation for self-destruction, or in secreting instruments for future use, will generally, and, with me, have never failed to adhere strictly to a pledge given in good faith, with feelings of solemnity.

"With most patients, ever so violent, there are times when they will make promises, which will have no inconsiderable influence. Those who are desirous to labor, are easily induced to give a pledge to be orderly and industrious, and make no effort to escape.

"A more quiet and regular class of patients, of which we always have more or less, are permitted to go abroad unattended, on a pledge to return with punctuality, and few indeed ever forfeit it.

"Advancement to a better gallery, permission to ride or walk, admission to the matron's parties, liberty to attend chapel on the Sabbath, are obtained on a pledge given or implied, and well understood, that every propriety suitable to be observed in the place, is absolutely binding on them. It is sufficient, in most cases, for patients to know that privation of privileges will follow violation of a pledge, to induce them strictly and punctually to adhere to whatever is expected of them.

"Having adopted this course with respect to pledges, and the inculcation of self-respect and self-control, we have very little need of personal restraints; and while this sheet is being written, but *one* individual in the hospital has any restraint upon his person, and this only to prevent his destroying his clothes and bed; he is quiet, and entirely harmless.

* "*Courts or yards.*—By relying upon the pledges of our patients, and inculcating self-respect, we have been able to dispense with the use of courts. They have a prison-like appearance, and while in them, our patients were constantly rolling in the dirt, or sleeping upon the ground, thus soiling their clothes, and becoming sun-burnt. We find that *one* attendant can take charge of the same number of patients while walking or at labor, as he could formerly in the courts, and they are more pleasantly and usefully employed. Escapes were more common while these were used; for, the wall being considered a protection, less vigilance was used by the attendants. We now dispense with them entirely, and find that not only the personal appearance of our patients is improved, but they are also more quiet, and have more self-respect.

"*Warmth and ventilation.*—The excellent arrangements for warmth and ventilation in the hospital, contribute no less to the health than the comfort of its inhabitants. In every attempt at warming an institution, or any large public building, both these objects must be considered. Purity of air is no less essential than warmth of temperature. Warmth can be diffused much more readily and effectually in a building in which suitable arrangements for ventilation are made. The currents *in* and *out* of the apartments should be free. Warmth by furnaces is not communicated by radiated heat, as from a fire-place or stove, but by a supply of air being introduced, raised to a warm temperature, to take the place of air that escapes by the ventilating passages; without these passages, the air already in the apartments will not escape, and consequently a new supply of warm air can not be introduced to any desirable extent.

"The desideratum on this subject is, to admit free currents of air, warmed to a suitable but not high temperature, and always to have ventilating passages, so as to allow free currents of air to escape. Without this latter provision, satisfactory results will not be had from hot air-furnaces; with this arrangement, in due proportion, the apartments will be easily warmed, readily ventilated, and made pure and wholesome. Another consideration must not be overlooked. The air admitted must be taken from out of doors; no suitable supply can be obtained elsewhere, and the ventilating openings should go up in the

centre wall of the building, and terminate in the attic, and not open out of the building. Stoves, steam, and hot water are all objectionable as modes of warming public buildings, in which a large number of individuals congregate, and much more reside ; they do not aid ventilation, and ventilation can not be thorough and perfect by any other mode whatever than by hot air-furnaces, which continually force in liberal currents of warm, pure air.

"It is surprising how little this subject is understood, and how badly the principle, simple as it is, is usually applied. In this hospital, one experiment upon another has developed the true method ; and our apparatus for this purpose is as perfect as we can expect or desire.

"The furnace which is most approved, is manufactured by our ingenious townsman, Wm. A. Wheeler, Esq., from a model of his own invention, which, with comparatively little fuel, heats a great current of air, sufficient, in ordinary weather, to warm a building *one hundred* feet long by *thirty-five* wide, and *three* stories high. One of these furnaces is placed in each of the *four* wings of the hospital. The fuel which they all consume, during the season when fires are necessary, varies little from one cord of wood a day. Two or three small furnaces, in addition, are used a few days in the year, when the weather is extremely cold.

"The temperature of the hospital is agreeable and uniform, not varying as much in all the cold season as it does in the month of July. Fires are kept burning in the night, when the thermometer is down to *ten* or *twelve*, and the degree of warmth is regulated at all times by the thermometer. Health generally prevails in winter, and there is no suffering at any time from cold."

TABLE 4.

Statistics of the State Lunatic Hospital, from January, 1833, to November 30th, 1840.

	1833.	1834.	1835.	1836.	1837.	1838.	1839.	1840.	Total.
Whole number of patients admitted,	153	119	113	125	168	177	179	162	1,196
Discharged including deaths and elopements,	39	115	112	106	121	144	168	155	960
Discharged recov'd.	25	64	52	58	69	76	80	82	506
Discharged impr'd.	7	22	23	17	23	24	29	29	174
Died,	4	8	8	8	9	16	22	15	90
Eloped,	1	1	1	1	0	0	0	0	4
Patients in the hospital in the course of each year, ...	153	233	241	245	306	362	397	391	1,196
Patients remaining at the end of each year,	114	118	119	138	185	218	229	236	0
Males admitted,...	96	79	51	66	94	96	80	75	637
Females admitted, ..	57	39	62	59	75	81	99	87	559
Males discharged, ..	19	58	57	56	66	74	66	68	463
Females discharg'd.	15	48	46	41	47	54	80	87	418
Males died,	3	5	4	6	6	10	14	6	54
Females died,	1	3	4	2	3	6	8	9	36
Patients sent by courts,	109	55	89	117	129	123	123	105	0
Private,	44	64	21	8	39	54	56	56	0
Recoveries :									
Males,	13	33	27	32	37	45	32	28	247
Females,	12	31	25	26	32	31	48	54	259
Total recoveries,	25	64	52	58	69	76	80	82	506
Average in the hospital each year, ..	107	117	120	127	163	211	223	229	

The recoveries of males, exclusive of deaths, have been *fifty-one and one-fifth* per cent of the discharged; the recoveries of females have been a little short of *sixty-two* per cent of the discharged; average, *fifty-seven* per cent.

TABLE 9.

OCCUPATION.

Farmers,	145
Laborers,	106
Shoemakers,	47
Seamen,	43
Merchants,	39
Carpenters,	31
Manufacturers,	28
Teachers,	23
Blacksmiths,	16
Printers,	14
Students,	16
Tailors,	10
Machinists,	8
Clothiers,	7
Coopers,	6
Bricklayers,	5
Millers,	4
Cabinetmakers,	4
Clergymen,	3
Bakers,	4
Musicians,	4
Peddlers,	4
Painters,	4
Papermakers,	3
Calico printers,	3
Sailmakers,	3
Tanners,	3
Combmakers,	3
Turners,	3
Harnessmakers,	3
Physicians,	3
Coachmen,	3
Butchers,	3
Lawyers,	3
Innkeepers,	2
Stevedores,	2
Stonecutters,	2
Broommakers,	2
Coppersmiths,	2
Jewellers,	2
Watchmen,	2
Drovers,	2
Ropemakers,	2
Currier,	1
News collector,	1

Engineer,	1
Hatter,	1
Gardener,	1
Matmaker,	1
Stocking weaver,	1
Bellowsmaker,	1
Idiots,	11
Vagrants,	34
Females who have no regular employment, who are unaccustomed to labor, &c.....	105
Females accustomed to sedentary employments that are laborious, and to factory labor,.....	96
Females accustomed to active employments, the wives and daughters of farmers, mechanics, &c.	161
Many not classified.	

CASES OF HEREDITARY PREDISPOSITION:

Many medical men disbelieve wholly in *hereditary predisposition*; while others refer to it half the evils that "flesh is heir to;" the truth in this, as in most other cases, probably lies between.

The following cases, from one family, have come under my care in the course of the last twelve months.

Towards the close of November, 1839, a young woman aged *eighteen* was brought into the hospital in a state of complete dementia; she was not conscious where she was, nor who were around her; she would remain statue-like wherever she was placed, and neither ate nor drank, nor attended to the calls of nature, without being fed, or moved, by others; she gradually improved under efficient medical treatment, and in *four* months, some time in March, she returned to her friends, completely recovered.

In April following, a little more than a month after this young woman left the hospital, her mother was brought to our care, in a situation nearly like that of her daughter. Nothing could be worse than the situation of this woman. She improved slowly at first, but rapidly afterwards, and at the end of three months was restored to health and soundness of mind. She also returned to her home, and gave joy to afflicted friends in a restoration perfect and entire. She left the hospital towards the close of July.

In October, a son of the last named patient, and own brother of the first, aged *twenty-two*, was brought to the hospital a furious maniac. The case was a bad one, the excitement continued long and severe: he is now improving favorably, with a fair prospect of recovery.

Before there was any essential amendment in this last formidable case, another victim, from the same devoted household, came to our charge; the sister of the last named, and daughter of the one preceding, an interesting young woman of *twenty-four* years of age; and this was the worst case of all, for, in addition to common symptoms; was the debility and susceptibility of the puerperal state; her infant was one week old only, when the symptoms of this formidable species

of mania were rapidly developed ; the excitement was extreme, the mind perfectly chaotic, and jactitation so great as to require, in addition to restraint usual in such cases, the active vigilance of two experienced nurses. This patient is now convalescing, and we have reasonable ground to hope that both the brother and sister will return in less than a year from the time of the first sister's complete recovery ; so that the *four* may be in a hospital, in the very worst circumstances, and all be well, in *one* year.

Such cases as this are rare, although it is by no means uncommon that as many individuals of *one* family are successively insane.

Some time in the year 1838, a young lady was taken suddenly insane, on a journey to the west ; she was detained a few days in one of the institutions in the middle States. In a few weeks she was brought to our care ; before there was any change in the case, a brother was also brought to the hospital, who had been long insane, but who had then frozen his feet so badly that his friends determined to afford him better winter quarters ; before the necessary arrangements were made, however, mortification commenced in the frozen feet, and by the time he reached the hospital he was in a dying state, and did not survive his journey *twenty-four hours*. The sister convalesced favorably, but by this and other trials, relapsed, and was again as bad as ever. Before she became calm and tranquil again, another sister, older than herself, was brought to the hospital ; the case was violent, but the amendment rapid, and in a few weeks she was recovered, and went to her friends before the sister first committed was entirely well ; the latter continued to convalesce, and was finally completely restored to sanity of mind. Before she finally left the hospital, a messenger came to us, post haste, to say that another brother of this afflicted woman was a furious maniac ; papers were immediately prepared for his admission to the hospital ; before the messenger arrived with them this brother died in the greatest possible excitement.

The sister who endured all this affliction, steadily convalesced and has since returned to her friends, quite well.

The evidence of a constitutional predisposition to insanity, in such cases, is too strong to be resisted ; but the strength and activity of the hereditary taint is very different in different cases, and in different individuals in the same family."

TABLE 8.

CAUSES OF INSANITY.

Intemperance,—Males,	164
Females,	21—185
Ill health,	185
Masturbation,	103
Domestic afflictions,	129
Religious,	84
Loss of property, fear of poverty, &c.	71
Disappointed affection,	53

Disappointed ambition,	27
Epilepsy,	35
Puerperal,	30
Injuries of the head,	16
Abuse of snuff and tobacco,	7
Arising from physical causes,	567
Arising from moral causes,	364
Hereditary or having insane ancestors or near kindred,	361
Periodical,	239
Homicidal,	18
Actual Homicides,	13
Suicidal, or having a strong propensity to self-de- struction,	134
Actual suicides,	5
Of 663 cases that have been examined, :	
Have dark complexion, hair and eyes,	344
Light complexion, hair and eyes,	319

CASES OF HOMICIDES.

Since the opening of the hospital, we have had *thirteen* patients who have actually attempted homicide; except in *two* instances, the dangerous wounds inflicted proved fatal; *eleven* were immediately fatal. Of these, two have died, and *two* have been discharged recovered—in both instances, by the high courts of the Commonwealth.

It is a question of very serious import, whether an insane man, who has taken life in the excitement and from the impulse of his disease, should ever be enlarged. If he has not recovered from his insanity, the case to me is a clear one; the tendency to a recurrence of the act would be very strong, the circumstances of the case being the same. Every case of insanity has its peculiarities—the appetites, propensities, and passions are affected in different ways, in different cases. We will not stop to inquire, whether this arises from different conformation of the brain in different individuals; the fact is undeniable. One will tear his clothes and bedding, one will ornament his person, another will besmear himself with all kinds of filth; in one, benevolence will be active, in another a propensity to mischief, will predominate; in a few the propensity is to kill, although such individuals may be generally harmless, yet at periods they are not so; and in many cases these impulses are so sudden that no precautions can prevent danger. Other cases, no less unsafe, are those who suppose that they are commissioned to execute the commands of Heaven by destroying a fellow-being; their plans are devised and executed with so much art and secrecy, that no vigilance will detect the danger; the fatal stroke is struck without warning, and the hapless victim knows not the agent that has inflicted the deadly blow.

All such cases should be perpetually confined; no argument should weigh for a *moment* with a court of justice in favor of liberating such an individual. The fact that life has been taken, should overbalance

all motives to send such a person into society, again while the delusions and estrangements of insanity continue.

TABLE 13.

Showing the comparative Curability of Insanity, treated at different periods of disease.

	Total of cases.	Of each sex.	Curable or cured.	Incurable or not cured.
Of less duration than 1 year,....	493			
Males,.....		247	218	29
Females,.....		246	220	26
From 1 to 2 years,.....	192			
Males,.....		94	48	46
Females,.....		98	63	35
From 2 to 5 years,.....	190			
Males,.....		111	35	76
Females,.....		79	30	49
From 5 to 10 years,.....	136			
Males,.....		71	9	62
Females,.....		65	7	58
From 10 to 15 years,.....	80			
Males,.....		44	4	40
Females,.....		36	2	34
From 15 to 20 years,.....	28			
Males,.....		19	1	18
Females,.....		9	0	9
From 20 to 25 years,.....	21			
Males,.....		11	0	11
Females,.....		10	0	10
From 25 to 30 years,.....	7			
Males,.....		5	0	5
Females,.....		2	0	2
Over 30 years,.....	6			
Males,.....		3	0	3
Females,.....		3	0	3

From this table we learn that *four hundred and ninety-three* patients have been admitted into the hospital, whose insanity had existed less than *one year*; of these, *two hundred and forty-seven* are males, and *two hundred and forty-six* are females; *four hundred and thirty-eight* of these recovered, and *fifty-five* failed to recover; *twenty-two* died, leaving, of those living, only *thirty-three* that failed to recover; and making the recoveries, exclusive of the deaths, more than *ninety-five* per cent. This supposes, however, that the *twenty-eight* recent cases now in the hospital will all recover; this will not probably

prove true, as some may die, and a few fail to get well; this may diminish the per cent *one* or *two*, but can hardly fail to leave it above *ninety*.

TABLE 20.

Showing the comparative expense of supporting old and recent cases of Insanity, from which we may learn the economy of placing the insane in institutions in early periods of disease.

OLD CASES.				RECENT CASES.			
No. of old cases.	Present age.	Time insane.	Total expense of old cases at \$100 a year before coming to the hospital, and at \$132 since.	No. of recent cases.	Present age.	Time insane.	Cost of support at \$2 50 a week.
2	66	25 years.	\$2828	1171	34	9 weeks.	\$22 50
3	34	11 "	1320	1168	50	32 "	80 00
7	45	14 "	1620	1142	20	17 "	42 50
8	57	18 "	2120	1138	48	32 "	80 00
12	42	22 "	2510	1134	28	28 "	70 00
18	68	31 "	3410	1132	56	15 "	37 50
19	56	15 "	1820	1131	45	20 "	50 00
21	36	13 "	1610	1126	30	16 "	40 00
27	44	13 "	1610	1122	51	12 "	30 00
44	53	24 "	2700	1119	47	32 "	80 00
45	57	22 "	2450	1118	17	55 "	137 50
56	42	14 "	1700	1109	47	21 "	52 50
101	48	18 "	2550	1108	28	32 "	80 00
102	50	22 "	2450	1107	33	16 "	40 00
133	41	10 "	1050	1106	26	21 "	52 50
176	52	17 "	2100	1104	40	16 "	40 00
180	45	18 "	1121	1090	59	26 "	65 00
190	47	10 "	1380	1089	48	18 "	45 00
209	36	13 "	1580	1085	24	20 "	50 00
223	47	17 "	1980	1062	40	16 "	40 00
247	39	15 "	1730	1060	17	26 "	65 50
255	42	17 "	1920	1058	39	11 "	27 50
260	44	15 "	1500	1057	18	16 "	40 00
274	37	12 "	1400	1049	28	16 "	40 00
278	47	7 "	1040	1047	63	40 "	100 00
413 years.				563 weeks=nearly 11			[years.
Average expense of old cases,			\$1,903 60	Average expense of recent cases,			\$56 00
Whole 25 old cases have cost,			47,590 00	Whole 25 recent cases have cost,			1,400 00

On a former occasion, I collected some facts relative to the expense of an equal number of old and recent cases, to show the advantage of the early application of the means of recovery. For the same purpose, this table has been made showing the expense of supporting the *twenty-five* cases now first on the records of the hospital, at *one hundred* dollars a year, previous to their being placed in the hospital, and at *two dollars and a half* a week, since in the hospital; and the *twenty-five* recent cases, last on the records, who have been discharged recovered.

It appears that the expense of supporting the old cases, in the aggregate, is *forty-seven thousand five hundred and ninety* dollars, an average of *one thousand nine hundred and three* dollars and *sixty* cents.

The *twenty-five* recent cases cost, in the aggregate, after they became insane, *one thousand four hundred and eight* dollars, an average of *fifty-six* dollars.

The *twenty-five* old cases have been insane, in the aggregate, *four hundred and thirteen* years, an average period of *sixteen and one-half* years each.

The *twenty-five* recent cases have been insane, *five hundred and sixty-three* weeks in the aggregate, and *twenty-two and one-half* weeks on the average, not *two-thirds* of which time was spent in the hospital.

On the score of political economy alone then, how desirable that institutions be furnished, so that all the recent insane may be placed in them and have the opportunity for cure, by which not only may great suffering be avoided, but heavy expenses be saved. And if *three-fourths* of these individuals, now doomed to be the perpetual victims of disease while life shall last, had been restored to the enjoyments of society and active usefulness, they might have been producers of at least an equal sum to that of which they have now been the expenders; the difference would have been great, and worthy of all consideration.

But who can estimate the sufferings of a mind diseased, laboring for years under delusions, vitiated appetites, morbid sensibilities, perverted tastes, and estranged and excited feelings and propensities?

Such are the sufferings which are removed by curing insanity. What community can neglect this great good and not feel deep regret, and assume an awful responsibility?

TABLE 15.

Showing the comparative curability of insanity attacking at different ages.

	Total of cases.	Total of each sex.	Curable.	Incurable.
Under 20,	150			
Males,		78	29	49
Females,		72	46	26
From 20 to 25,	182			
Males,		97	47	50
Females,		85	50	35
From 25 to 30,	159			
Males,		88	45	43
Females,		71	42	29
From 30 to 35,	160			
Males,		97	45	52
Females,		63	36	27
From 35 to 40,	142			
Males,		62	31	31
Females,		80	45	35
From 40 to 45,	94			
Males,		51	35	16
Females,		43	32	11
From 45 to 50,	83			
Males,		38	28	10
Females,		45	38	6
From 50 to 55,	70			
Males,		33	23	10
Females,		37	26	11
From 55 to 60,	39			
Males,		17	12	5
Females,		22	15	7
From 60 to 65,	30			
Males,		16	13	3
Females,		14	11	3
From 65 to 70,	20			
Males,		13	7	6
Females,		7	5	2
From 70 to 75,	11			
Males,		8	4	4
Females,		3	3	0
Over 75,	9			
Males,		5	2	3
Females,		4	0	4

I have been careful to collect the facts in this table, as they prove so different from what are found to be the results in many other hospitals for the insane.

One fact is prominent, that persons attacked *over forty* years of age, are more likely to recover from insanity, than those *under forty*; the table will show this to be the case.

LABOR AND EMPLOYMENT:

The labor performed during the year, in all departments of industry, at the hospital, whether we consider its utility to the individuals employed or its pecuniary advantages, has never been more successful.

No class of our patients are so contented and happy as the laborers, no other convalescent recovers so rapidly or so favorably. On the farm, in the garden, at works of ornament and improvements, we have a sufficient number of individuals ready, at all times, to lend a helping hand; so also in every department of domestic labor and in the workshops, those of our patients who are versed in these employments, obey the summons to labor with cheerfulness and alacrity.

The following case, from among many, will show the benefit of labor. A farmer, aged about *thirty*, was brought to the hospital in August last, so violent as to be attended by *five* stout men; he had been reduced by disease and remedies, but was considered violent and dangerous. A few days after his admission, he requested to go out and aid the farmer in his work; he was permitted to do so; after he commenced labor, he improved in a very favorable manner, slept well, had a good appetite, and gained flesh and strength; at the end of a month he was well, and before the expiration of *two* months he returned to his home quite recovered. In such a case, it is difficult to conceive the effect of confinement; irritation, anger and violence, requiring restraint, might have followed, which would almost necessarily have made a protracted case, and probably an imperfect cure.

Many of the old residents pursue, from year to year, a regular course of employment; they are diligent and faithful, have liberty to go where they please about the premises, and accomplish a great amount of valuable service.

(7.) *Letter from John S. Butler, M. D.*

BOSTON LUNATIC HOSPITAL, }
December 20th, 1841. }

Hon. D. RUSSELL, President, &c.

Sir :

Some time since I had the honor of receiving from you, as President of the Board of Trustees of the New-York State Lunatic Hospital, a communication propounding questions relative to this institution. Circumstances in part explained to you, have unavoidably delayed my answer to your letter.

In 1836, the Legislature of the Commonwealth directed the several counties of the State, to provide, in connection with their respective

houses of correction, suitable accommodations for the safe keeping of such pauper insane, or idiotic persons, as were unsafe to go at large, and who, from the incurable character of their malady, &c. &c. could not be received at the State Lunatic Hospital. On account of the large number of paupers, insane and idiotic, and for other reasons, the government of the county of Suffolk, (Boston and Chelsea,) or more properly of the *city of Boston*, did not deem a connection with the house of correction advisable, and consequently in 1837 obtained an act of incorporation, from the Legislature, of the "Boston Lunatic Hospital," in which act the hospital was restricted to the reception alone of the pauper lunatics of the city of Boston, from a misapprehension, I presume, that it might, otherwise, interfere with the State hospital.

The building was commenced in 1837, and finished in 1839, is calculated to accommodate 100 patients, and was erected principally by the inmates of the house of correction, at an expense, including that of outbuildings, barn, wash-house, fences, &c. of \$36,000. It is plainly and substantially built of brick, is convenient and comfortable, and well answers its intended purposes. It consists of a main building, 40 feet square, five stories high, including basement, and two wings, each 40 feet by 60, three stories high, with large and commodious dormitories in the attic. The *basement* story of the main building is occupied by the kitchen and store room; the *second* by the patients' dining room, office and apothecary's shop; the *third*, by the family parlor and dining rooms; the *fourth* by the family chambers and the serving room; the *fifth* by chambers and the chapel; the *attic* by chambers and store rooms; in all 23 rooms.

Each story, in the wings, contains 12 rooms, 12 by 8 feet, which, with the dormitory for 17 in the attic, will admit beds for 50 patients, &c. in each wing. Water is thrown from wells in the yard, by forcing pumps in the cellar, into large tanks in the attic, affording an abundant supply to the water closets, wash and bath rooms of the different galleries; three large cisterns sunk in the yard, and supplied from the roof of the building, provide the requisite supply of soft water.

An out building of wood, adjoining the eastern wing of the hospital, contains a washing and ironing room, a barn and wood house. We have no *solitary*, a necessary appendage to an institution of this character, for the *occasional* seclusion of noisy and profane patients; one will probably be erected in the spring.

The city own about 60 acres of land in this vicinity, upon which are located the house of industry, house of correction, house of reformation for juvenile offenders, and the lunatic hospital. Between three and four acres only were appropriated to the hospital, and only little more than an acre of that is under cultivation. The use of more land could be obtained in the vicinity, undoubtedly; so far we have found occupation for our male patients, in the grading and cultivation of our grounds, preparation of wood and coal, &c. &c. More land will soon be needed. We have comparatively but little available force among our male patients.

The washing and ironing of our whole family is done by our female patients, under the direction of a laundress, and the making and mend-

ing of the clothes of our male and female patients, is also done by them under the supervision of a seamstress, with the occasional aid of an attendant.

Our amusements consist in various games : Cards, draughts, backgammon, bowling, &c. walking parties, and in the semi-monthly sewing parties, which last are to *all* of our family, occasions of much interest and pleasure.

A small library of interesting books have been kindly supplied us by our friends in the city, and several newspapers are sent to us by the editors. Sensible of their vital importance to the enjoyment and improvement of our patients, we make every effort to provide some kind of occupation and amusement for them.

It is conceded that the worst class of lunatics in New-England are found in the wards of this hospital ; they are the pauper lunatics of a large city. Many of them coming from its recesses of ignorance and intemperance, presenting that moral and physical prostration which leaves little opportunity for the successful application of medical or moral treatment. In comparing our results with others, these facts should be borne in mind, and also that the original design of the institution was the " safe keeping of the incurable." Within the first thirty days of its operations, 72 incurable cases were admitted to its wards ! and only eight recent cases were admitted during the first six months ! while out of one hundred and seventy-one cases admitted, one hundred and twenty-one cases were considered hopeless ; and as we cannot remove old cases to make room for recent ones, it results that most of them must remain in our wards until removed by the operation of natural causes. Many came in here with no friend but Him whose eye ever watches over the poor destitute, and how greatly does this very destitution and wretchedness increase their claim upon the charity of the community, and the solemn responsibility of those to whose charge these helpless sufferers are committed !

All commitments to the hospital are made by the municipal and police courts of the city ; the patient being brought before the judge in every instance, and the medical and other witnesses being examined by him in open court. Certificates are not admitted as sufficient evidence. The judges of the municipal, police and probate courts are required by a law of the Commonwealth to visit and inspect the hospital every six months, and report upon its condition to the government of the city ; which reports are published.

The whole number of lunatics and idiots in the State of Massachusetts is twelve hundred and seventy-one. Of these four hundred and ninety-eight only are in hospitals, the remaining seven hundred and seventy-three are mostly to be found in the alms houses, jails, and houses of correction. Their condition demands investigation, for there is too much reason to fear that that public sentiment is greatly in error, which considers that the three hospitals in the State furnish ample provision for the wants of the lunatic !

The preceding statements, with the annexed tables, meet all the inquiries presented in your communication ; for further details I refer you to the first and second annual report of the hospital. You will

perceive by them that the duties of superintendent of the lunatic hospital are but a small portion of my labors ; for in the discharge of my duty as physician among the 1,470 sick and insane under my charge during the past year, I had only the assistance of two pupils, whose *board* was the only compensation allowed by the city.

The right organization of an institution like that of New-York, an object so prominent and magnificent, is a subject of immeasurable importance to the cause of the improved treatment of lunacy, and consequently of deep interest to those whose feelings and influence are enlisted in establishing that treatment upon a permanent and secure basis. Upon this topic, many considerations of much moment present themselves to my mind, but they have undoubtedly been presented to you by others better able than myself to do them justice. There is one, however, to which I will call your attention, because it lies at the foundation of a successful *permanent* organization, and is, in my opinion, the only safe basis upon which a lunatic hospital can be organized ; which is, that the superintendent should be a physician, with the entire control of all departments of the institution, domestic as well as medical, (of course, under the direction of the board of trustees) The superintendent should have this control, because unity of action, arising from unity of views and sentiments, is the the chief element of system. System cannot exist if the action comes from more than one source ; and without system, there cannot be success. Upon him should responsibility rest, as under any arrangement, in public estimation it will rest ; he should have the entire control ; his spirit, his plans, his system should pervade the institution ; from him all power should proceed, that consequently when he delegates to others the duties of the different departments, those duties will be performed in accordance with that system, *however much* the opinions of subordinate officers may differ from his. The more entire the control, the greater safety in delegating to others these subordinate duties ; and this truth is well illustrated in the best arranged and the best managed hospital in this country, (Worcester,) where the superintendent, (*nominating* the steward to the board, and appointing all the officers,) having the entire sway, derives the greatest assistance from, and reposes the utmost confidence in his subordinate officers. They adopt his system and carry it out. There is no clashing of conflicting opinions ; there can be none where one system pervades the whole. This principle is adopted in all the departments of associated efforts in society, and is nowhere more essential to successful results. The guards against the possible abuse of this concentration of power in one individual, are to be found in the frequent and rigid inspection by the trustees, of every department and room in the hospital, and in the free access and invited scrutiny of an intelligent community. Under such an oversight, it is not possible, in this country, for any erroneous practices to be kept long concealed from the public eye.

I remain, gentlemen, with great respect,

Your obt. servt.

JOHN S. BUTLER, *Superintendent.*

*Hon. Board of Trustees;
New-York State Lunatic Hospital.*

(8.) *Extracts from the 7th annual report of the Trustees of the State Lunatic Hospital, at Worcester, Mass. December, 1839.*

"At the end of another year the trustees are happy to be able to report the continued success of the great work of public beneficence in which they have been permitted to minister. Already has the Commonwealth by this institution extended the hand of Christian charity to more than a thousand of its children, who, in the last century, would have been, at least, cut off from the brotherhood of man, if they were not also believed to be, as in more remote ages, forsaken by their Maker, and abandoned to malignant demons.

"In the hospital, as in the world, *the industrious are the healthiest, the happiest, and the most sincerely respected.* The disposition and the power to labor usefully, form a treasure more valuable than wealth alone; for they give to the possessor, what wealth may not, a claim to the respect of others, and a feeling of contentment with himself. We are told that in Spain the nobility indolently suffer the continuance of insanity, in the same hospitals in which their poorer and more industrious companions are cured. So this hospital has had instances of patients, who brooded over their sorrows in idle discontent, without a ray of hope, until they were roused to effort and industry by the winning persuasions of the superintendent, and then the shadows began to disperse, and the mind awoke to clear apprehensions and happy thoughts, and convalescence had its steady course, until the patients returned in joy to their homes and their friends."

(9.) *Extracts from Dr. Woodward, the Superintendent's report, of same hospital, for same year, ending December, 1839.*

"Insanity, of all diseases the most fearful, is found to be among the most curable. To effect this, however, *aid must be seasonably sought* which can arrest its progress and remove its influence, before it becomes established by habit, and before those organic changes take place which naturally render it irremediable and hopeless.

"In every condition of life, whether in the possession of wealth or suffering the privations and wretchedness of poverty; whether the tenants of a palace or a cabin, the insane are equally miserable and degraded. To afford a *chance* of cure in old and long established cases, they must be taken from their homes, and from old associations, and placed in the care of strangers, in institutions designed for their benefit, before one ray of light can penetrate the dark recesses of the long benighted intellect, or one spark of comfort warm and animate their cold and deadened feelings."

"We must not for a moment overlook the fact, that *insanity is a physical disease*, that the mind, in the most deplorable case, is not obliterated; its integrity is only disturbed; it remains the same; its faculties ready, as soon as the deranged physical structure shall have regained health and soundness, to resume operations and exhibit the manifestations which legitimately belong to them."

"The DIET of our patients is simple and substantial; they all have animal food once a day, and many of them at breakfast and dinner if

they desire it. The bread we use is of the best quality, and when eaten is never new, and rarely more than *two or three* days old. It is all made by the cooks in the hospital. The patients have all the varieties of vegetables common to the season, of which we raise an abundance. Coffee is given them in the morning and tea at night; they are generally allowed to eat as much as they desire.

"The tables are all set neatly, furnished with knives, forks and crockery. The conduct of the patients is generally civil and orderly while at their meals. We have at no time half a dozen patients who cannot go to the table and eat with knives and forks.

"Of the *one thousand and thirty-four* patients who have been in the hospital since it was first occupied, there have not been *twenty* who have not taken their food at the table with others more or less of the time; of these *twenty* more than *three-fourths* were so ill and feeble when they arrived at the hospital as to be unable to do so, and died without amendment in a few days. While this sheet is being written, we have not a solitary individual who has not for a very considerable time taken food with others, with knives and forks. No injury has ever been done by allowing patients all the means of comfortably taking their meals.

"The difference between eating food in solitude, from a tin or wooden dish, with the fingers or a spoon, and going to a neatly furnished table, and taking meals from crockery with a knife and fork, is the difference between a savage and a civilized man, of a brute and a human being.

"No one thing contributes more to awaken self-respect and restrain the furiously insane, than this indulgence at table, and the confidence which he feels is placed in him by those who have him in keeping. The same is true in respect to dress and the treatment he receives from those whom he looks upon as superiors and whom he feels bound to obey. If he is neatly and comfortably clad, like those whom he meets, he feels that he is as good as others, respects himself as they appear to respect him, and is careful to do nothing by which he shall "lose caste." If his garments are tattered or dirty, he will tear them off or soil them more, if neat and tidy, he will preserve them with care and even feel proud of them.

"Within a few days, a patient was brought to the hospital, who had been confined *three* years in a cage; he had not used knife or fork to take his meals during this period, and had not felt the influence of a fire for *two* winters. The gentleman who brought him to our care manifested praiseworthy benevolence in his efforts to ameliorate his condition, and get him into more comfortable winter quarters, and hoped that in a few months we should be able to improve his state, and that he would observe the decencies of life and take his food in a proper manner; while he remained conversing respecting him, the patient below was quietly seated at the table taking his supper with his knife and fork in his hand! On the second Sabbath from his admission, he attended chapel quietly, and gave it as his unqualified opinion that he was "*well off*."

"Another man came into the hospital quite recently, furious as a wild beast, noisy, violent and outrageous; he was placed in a solitary

[Senate, No. 20.]

room, with wristbands upon his arms to save his clothes and keep them on. For many days in succession he tore his clothes and stripped himself constantly. A few days ago, I found him in a state of perfect nudity. I proposed to him to be dressed and go into the gallery; he promised that he would be quiet and tear no more clothing; upon his pledge he went in—he has been quiet, has kept his clothes upon him, takes his food at the table with others, and is quite civil, indeed in a state of entire *contrast* to what he had been before.

“If, in our daily intercourse with the insane, we should treat them as inferiors or pass them by without notice or attention, refuse to hear them, and evince towards them a feeling of superiority, we should find them in a constant state of irritation and excitement. If we treat them kindly and politely, inquire after their welfare, and hear patiently their story, we awaken in them a spirit of mildness and affection, we can control them without severity, and gain their confidence and esteem.

“If there is any *secret in the management of the insane*, it is this: *respect them*, and they will respect themselves; *treat them as reasonable beings*, and they will take every possible pains to show you that they are such; *give them your confidence*, and they will rightly appreciate it, and rarely abuse it.”

“In addition to the common amusements which are daily met with in the hospital, are THE MATRON’S PARTIES, which assemble every week or every other week in her apartments, and THE DANCING PARTIES which are occasionally held in winter in the best female galleries.

“The matron’s parties have now been regularly kept up for *three* successive years, with scarcely an interruption. At these parties, from *thirty* to *forty* female patients assemble to spend the afternoon socially, and to do the work, for the benefit of the hospital, which the matron provides. They are generally conducted with great decorum; every patient is dressed in her best attire, and feels happy at being allowed to join in the party; conversation becomes general and pleasant, every one feels disposed to appear to the best advantage, and make all around them happy. Some of the attendants are present to assist the matron about the labor; the family of the superintendent, and strangers, if any are present or come in the course of the afternoon, are requested to tarry and join in the pleasure of the visit. Before they separate, some fruits or refreshments are served around, of which a parcel is bespoken by almost every one, for some friend who has not left the gallery.

“These parties have been of unquestionable benefit; they inspire confidence in the timid, and self-respect in the boisterous and negligent. An effort is often made beforehand to be quiet and civil, that they may not fail of an invitation which is always gratifying and secures the friendship of the patient for the matron, and good will to the institution.

“The *dancing parties* are not frequent, sometimes *three* or *four* in a year. Some of the patients take great interest in them, and they are a subject of conversation sometime before and after. When the contemplated evening arrives, and nothing occurs to render the amusement improper, one of the long halls is put in order, and lighted for

the occasion. Musicians are always at hand, and every thing is made ready. The patients assemble from the different galleries, dressed in their best attire, some to join in the dance, and some to witness it. Every thing is conducted with the greatest propriety, and every one present seems happy. At these parties, from *sixty* to *one hundred* often assemble. On some occasions the halls have been dressed with evergreens, and have made a very beautiful appearance. At or before *nine* o'clock, the assembly disperses, and the patients retire to their apartments, pleased with their amusement, and grateful that they have been permitted to partake of it.

"It is certainly a most interesting fact, that the insane, with all the delusions and excitement which characterize their disease, will go into the field, the garden, the workshop, or the places of domestic labor, will attend parties, and go to the chapel, and appear composed, attentive, and in all respects, rational."

"From the earliest history of insanity to the present time, the impression has been general, that *the moon has an influence upon the maniac*. In many old cases that have been brought to the hospital, the friends have informed us that the patient was worse at particular times of the moon, and that this periodicity has been obvious for a long time.

"Our own experience, in a great number of such cases, has not confirmed the impression of friends. *The periodicity of insanity is one of the inexplicable phenomena of disease*, and, like epilepsy, the law in each case seems to be applicable to itself and no other. *One* case has paroxysms every other day, another every other week; *one* has *one* insane week in a month; another has a paroxysm of excitement *one* month, and a period of gloom and depression on the alternate month; another case will have semi-annual occurrences, and many have an attack of excitement every year, every two years, and sometimes regular attacks at longer intervals. In such instances, it is often the case that some exciting cause has a manifest agency in producing the disease. It is far from being the fact that such cases have any thing like regular intervals, especially those in whom the lucid interval is prolonged to months and years. Some exciting cause, as a family affliction, reverse of fortune, the loss of a friend, the anxiety and care excited by sickness or trouble, and perplexity of any sort renews the insanity.

"It is true of insanity, as of many other diseases, that one attack increases the susceptibility to another, and a slighter cause will induce the disease at each successive attack, till it is scarcely possible to ascertain the agency of any cause in producing the paroxysm."

(10.) *Extract from the Annual Report of the Boston Lunatic Hospital, July, 1841.*

"While the recovery of recent cases is the most prominent consequence of our operations, the great improvement in the old cases, clearly demonstrates the well-working of our system of treatment. During the year there has been a surprising diminution of excitability

among our patients, and a corresponding increase of quietness, and of cheerful, ready acquiescence in the necessary regulations of our halls. Another year's experience has abundantly confirmed all that was stated in the last report in favor of the influence of *religious services*. Simply considered as remedial and disciplinary measures, I would on no consideration, dispense with their assistance."

(11.) *Statistics of the Boston Lunatic Hospital, from Dec. 11, 1839, to December 1, 1841.*

Whole number admitted,	171
Whole number discharged,	69
Discharged recovered,	28
" improved,	6
" at request of friends and towns,	7
" sent back to House of Industry, as unfit } subjects,	9
Eloped,	2
Died, (<i>one suicide</i>),	17
	69
Whole number of old cases admitted,	121
Discharged recovered,	1
" improved,	3
" unfit, request of friends, &c.	16
Eloped,	1
Died,	13
Remaining,	87
	121
Whole number of recent cases admitted,	50
Discharged recovered,	27
" improved,	3
Eloped, (a recovery)	1
Died,	4
Remaining, (mostly lately admitted)	15
	50
Of the fifteen cases remaining, there are, favorable, } (3 leave next week well)	9
Doubtful,	6
	15
Present number of patients,	102
Males,	51
Females,	51
	102
Whole number,	171
Males,	95
Females,	76
	171

Amount appropriated annually by City Government, for support of Hospital, \$12,000 00.

Average number of patients,..... 103

Expense of each patient per week,..... \$2,22 $\frac{3}{4}$

If In this estimate the salary of superintendent is not included, his duties embracing other institutions, he is paid as the other city officers.

The officers of the hospital are:

Superintendent, (who is also physician of City Institution) board of family, and \$1,200, proportion of salary estimated on Hospital, $\frac{1}{3}$...	\$400 00
2 Steward and matron, board of family,.....	600 00
4 Male attendants, at \$15 per month,.....	720 00
4 Female attendants, at \$2.50 per week,.....	520 00
1 Housekeeper, 3.00 "	156 00
1 Washerwoman,..... 3.00 "	156 00
1 Cook, 2.50 "	130 00
1 Assistant Cook, 2.00 "	104 00
1 Seamstress,..... 2.00 "	104 00
1 Table girl, 1.50 "	78 00
1 Chambermaid, 1.50 "	78 00
2 Male assistants, on general in and out door work,..... 14.00 per month, ...	336 00

\$3,332 00

Whole number of insane and idiotic in Massachusetts, 1271

" " " " " Hospital, 490

" " " " " not in Hospital, 773

1271

Note—In the American Almanac it is stated that there are 173 colored patients at public charge. Meaning, I presume, from the use of these terms, when applied to whites in hospitals, which, if so, is an error; there are not over 27 colored in all our hospitals.

J. S. B.

No. IV. VIRGINIA.

(1.) *Letter from F. T. Stribling, M. D. Superintendent of the Western Lunatic Asylum, at Staunton, Augusta county, Va. to the Hon. D. RUSSELL, President of Trustees of New-York State Lunatic Asylum.*

Western Asylum, Va. October 19th, 1841.

DEAR SIR—Yours of 6th inst. was received yesterday. In reply, permit me to assure you that it would give me much pleasure to afford your board of trustees all the aid in my power, towards rendering efficient the noble charity which has been committed to their administration. But I regret that your letter found me in the midst of preparation for putting into operation, a building which has just been completed at this institution, for the accommodation of sixty additional patients. Hence it will be out of my power, at present, to respond to your inquiries as much in detail, as I should otherwise have done. I forward, herewith, a copy of my annual report for 1839, together with a copy of our by-laws, which will, I trust, enable you to ascertain most of the facts in relation to this institution, which your interrogatories seem to have been designed to elicit; and I will content myself with responding particularly to such of your queries as are not fully met by these documents.

1st. This asylum was opened for the reception of patients in July, 1828. It was established by an act of the Legislature, appropriating for its construction \$10,000, but the buildings have since, from time to time, been enlarged by subsequent appropriations, until the whole expense for the purchase of land, and the erection of buildings, amounts to \$66,000. The institution has no fixed annuity for its support, but depends upon the Legislature for annual appropriations from the treasury of the Commonwealth for this purpose. These appropriations vary in amount according to the wants of the institution, as reported by the the court of directors.¹

2nd. The institution was designed for the insane citizens of Virginia, without regard to their pecuniary circumstances; as before remarked, it is supported from the treasury of the Commonwealth. The poor have equal claims with the rich, upon its apartments. Those, however, who are able, are required to refund to the commonwealth, what the court of directors may deem equivalent for the cost of their maintenance, therein.

3d. The lithographic impression accompanying my report will acquaint you with the external plan and arrangement of the buildings, except that the four story building at the southern extremity, has not yet been erected, but is designed to be put up at as early a day as practicable. The centre building is 50 feet square, and contains on each floor 4 rooms, separated from each other by passages 12 feet wide, intersecting at right angles. These rooms are occupied by the steward of the institution and his family, a sitting room for male patients (of the

first class,) a parlor for the females of the same class, and the office of the superintendent; and the remaining apartments are occupied by *insane ladies*, who have them handsomely furnished, and have each in their employ, a separate white attendant. The wings contain in all 75 apartments, which are arranged on each side of a passage 10 feet wide; these apartments are 11 feet square, with a ceiling 12 feet high, and one of them is allotted to each patient. The 4 story building at the northern extremity is just completed; it contains 60 apartments for patients, together with an attendant's room, dining room, water closets and bathing room for each class of patients; the dimensions of the apartments correspond with those in the wings, just described. We think this building admirably adapted to all the purposes of classification ventilation, &c. which are indispensable, or are desirable in such an institution. The centre building and wings, however, are very defective in this respect. The whole building is constructed of brick; the work is neatly and substantially done, and the appearance of the establishment will compare favorably with all that I have seen, which embrace most of those in the United States.

4. The whole establishment will accommodate conveniently 140 patients, 95 males and 45 females, and we have on file 180 applicants for admission, not one of whom can be received, for want of room to accommodate them. There has been but one case of *suspected* suicide; not certain that death in that instance was not the result of accident instead of design.

5. There are 65 acres of land attached to the establishment, which was purchased about 3 years since, it was, however in so rude a state that not more than 25 acres of it, has yet been subjected to cultivation. This has been worked entirely by the patients, with their attendants. The product this year in wheat, corn, potatoes and pork, will be about \$800, in addition to supplying the institution with vegetables, pasturage, &c. &c. The aggregate cost of the land was about \$3,500. The quantity of land will not be sufficient to employ our labor after we shall have done grading the grounds, and which now affords considerable employment to the laboring class of patients.

6. Pauper patients are admitted here under the warrant of two justices of the peace, who having examined the patient, certify officially, the existence of insanity. Although the court of directors are also required to examine the individual whose insanity is alleged, and should they not concur in opinion with the justices, they are authorized to refuse him admission. Pay patients are admitted simply on the application of friends. The court of directors being satisfied from personal examination, of the patient's insanity; in such cases an obligation is required from responsible individuals to defray the expenses of the patient so long as he or she may remain in the asylum, to remove them when cured, and to pay the funeral expenses of such as may die.

7. The late census shows that there are in Virginia, 1048 white insane and idiotic, and 384 colored. This estimate, however, is I am satisfied, too low. Indeed I know of 25 or 30 lunatics within a few of the surrounding counties, who were not embraced in the reports from the deputy marshals. There are in the asylums of the State about

290, in the common jails about 85, and the remainder either confined or otherwise taken care of by their friends.

8. The average expense of the pauper lunatics, per annum, in this institution is about \$147. Those who pay are charged \$10, \$17, and \$25, per month, for board and medical attendance. The precise amount charged depending upon the style of their accommodations.

9. The officers, &c. are a physician, who is also superintendent, a steward, matron, treasurer, clerk, auditor, male and female supervisors, five white male attendants, the same number of female attendants, (including those who devote their services to a single patient,) and about sixteen servants, among whom are included cooks, washer-women, carriage drivers, dining-room servants, &c.

The salaries are as follows : superintendent \$1800 ; steward \$700 ; matron \$250 ; treasurer one per cent on moneys received from treasury of Commonwealth ; and five per cent on moneys collected from individuals ; clerk receives \$150 ; male supervisor \$175, female supervisor \$150 ; the male attendants receive \$12,50 per month, and the females about \$6,00 per month. The servants hire at about \$100 for males and \$40 for females, per annum. In addition to the above a barber is employed at a salary of \$100 per annum.

The salaries and wages are paid from the treasury of the institution, except that to special attendants, which is paid by the employer.

You have also requested, in general terms, "my views and opinions as to the system of government best adapted to an institution of this kind—also the discipline most proper to be introduced, and the most approved system of management." In saying that I approve most heartily of the system which is pursued in this institution, and referring you to the documents herewith forwarded for the details of that system, it seems to me I give a full response to this request. I can only say in addition, that your system can not be made too *mild* or *parental*—and that whatever discipline may be adopted, should be exclusively of a *restraining*, and not of a *coercive* character. In conclusion, permit me to express it as my decided and deliberate conviction, that the *most important* measure, requiring the action of the board of trustees, in the organization of their institution—and one on which its weal or wo must essentially depend, is the selection of a competent individual to whom they will confide its management and control. They may adopt the most perfect and unexceptionable code of by-laws which experience, humanity and skill could devise. They may employ the most competent and worthy individuals within the scope of selection, as subordinate officers and assistants. They may also exercise over the conduct of the institution the utmost vigilance of which they, as its chief guardians and directors are capable—and yet, should they be unfortunate in the choice of a superintendent, to whom the immediate administration of the affairs of the institution must of necessity be committed—for whose qualifications for the office, and fidelity to his trust, its prosperity is thus made essentially to depend—they can but expect that disappointment will be the result of all their anxiety and effort. And here, excuse me for suggesting that there is *one qualification*

which is *indispensible* for such an officer to possess—and that is, a *true heartfelt devotion*, as a philanthropist and a Christian, to the holy cause in which he is to engage. He may occupy the highest elevation in the scale of science—he may rank amongst the first in our land as a scholar, a gentleman and a Christian—yet, whilst a well cultivated intellect, a persuasive and winning manner, and a heart purified and ennobled by the genial influences of a rational religion, may go far to win for him the confidence and favor of your board, I repeat, that even with these high endowments and qualifications, he cannot, and will not conduct your institution so as to make it an ornament to your State and the boast of its citizens, (of both which it is susceptible,) unless he enter upon his duties with a soul big with the magnitude and importance of the trust confided to him, and with a resolution to devote the energies of his mind and body to the accomplishment of the great objects for which he may have been selected.

The importance, which as you perceive, I attach to this part of the subject, will plead my apology for having said so much in regard to it. Indeed, I could not feel that I am responding in good faith to your application did I fail to make this the prominent measure which in my opinion would require the attention of your board at the outset of your institution. Nor have I felt the least delicacy in presenting the matter as I have done, having no acquaintance whatever with any gentleman who may be a candidate for the office; and hence, not supposing for a moment, that a personal application can be made of my remarks.

If I can be of further service to you in promoting the good cause in which you are engaged, please do not hesitate to command me. It will at all times afford me the utmost pleasure to furnish you any information of which I may be possessed.

With the assurance of my best wishes for the success of your institution, believe me,

With high respect,
Your obedt. servt.

FRANCIS T. STRIBLING,
Physician and Superintendent.

(2.) *Letter from the Superintendent of the Eastern Lunatic Asylum of Virginia, to Hon. D. Russell, President Trustees N. Y. Lunatic Asylum.*

EASTERN LUNATIC ASYLUM, }
Williamsburgh, Va. November 9th, 1841. }

HON. D. RUSSELL :

SIR—Your letter of the 8th of October last, inclosing the interrogatories of the board of trustees of the State Lunatic Asylum, in the State of New-York; and requesting the result of my experience in the management of insane persons, has been received. An absence from the institution, and the difficulty of procuring an ancient record, I must plead as an apology for not answering your letter at an earlier date.

The government, discipline and management of a lunatic asylum, so far as it relates to officers, attendants and servants must be of a most

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[Senate, No. 20.]

vigorous and energetic character ; rather rigid than too relax. Nothing is so important as discipline and subordination, rules and order, in the government of an insane hospital. Without these the unfortunate class of beings, for whose benefit it has been established, would be often exposed to the evil consequences of rash and ill tempered attendants, who have the immediate control of them, at whose hands they not unfrequently receive harsh, not to say cruel treatment, without the means of redress. With few exceptions, insane persons are easily reduced to the most abject submission, through fear. By such treatment a curable is often converted into an incurable case of insanity. Besides, deranged persons soon become sensible to order and decorum, which, after a while, becomes habitual, and contribute not a little to the restoration of the power of reason. The government, discipline and treatment of the insane, however, should be materially different ; but I do not mean to say that there should not be either government or discipline, as some have suggested ; on the contrary, these are essentially necessary, and without them it is impossible successfully to treat the insane. It should be, however, a government adapted to their capacities, and the discipline, which should be that of a well governed family, where kindness, coupled with firmness, are the prominent characteristics of its governor. The best mode to treat an insane man is to deal with him as a sane person ; taking pains to make him understand that we are aware of his aberrations ; but we wish him to make an effort to act in conformity to our directions ; and unless it be in cases of absolute dementia, or idiocy, such a treatment will exert a salutary influence, even where the disease is perfectly incurable. In order to effect this object it is necessary that the officers and attendants conducting an insane hospital gain the confidence and esteem of the persons committed to their charge. This is readily secured, with few exceptions ; then the management of lunatics is comparatively an easy task, and the object of the institution more successfully attained. In establishing a system of government for a lunatic asylum, regard must be had to the character, habits and pursuits of the patients by whom it is to be occupied ; for instance, if it is designed for the higher classes of society exclusively, the rules and discipline must be suited to their standing, and their treatment must somewhat conform to their former habits of life. Hence amusements, games, reading, writing and riding ought to form a part of the moral treatment. If it is designed for the lower, or laboring classes, their former habits and pursuits must be kept in view, and labor in the shops, and especially in the open air, is essential to success. If it is to be a mixed asylum, the patients ought to be classified, not only in regard to the state of the mind, but also to their former condition in society. A disordered mind is more sensitive, in such matters, than a rational one. In all cases, however, the law of kindness should be the order of the house ; nevertheless, discipline and restraint are absolutely necessary. If it were not so, why confine the insane at all ? Without restraint and discipline I think it is impossible to restore an insane man. For instance, an insane person is disposed to tear his clothes, and destroy every thing that comes in his way ; the propensity is so irresistible that he cannot refrain. Though he may

even acknowledge the impropriety, and be directed by the keeper to forbear, he must be restrained. His hands are confined in mitts or muffs; he is no longer able to indulge his propensity. In the course of a few days, whether it proceeds from the mind leaving the subject of hallucination, or the disagreeableness of the position of his hands, or the fear of a repetition of the unpleasant sensations, or perhaps all combined, cannot well be determined; certain it is, the propensity to tear and destroy will become less and less active, and finally be entirely overcome. Could this have been effected without restraint? There are also cases, and I am happy to say, they are very rare, where rigid discipline is essential, and salutary. I allude to homicidal cases of insanity, and a propensity to beat and wound others, with a morose, bad disposition. Such cases I have had under my care, and after repeated efforts, by kindness and tenderness, to induce them to control their fury, I have been compelled to resort to discipline, and used the straight waistcoat, the shower bath, and the cold immersion, and in each and every case with decided benefit, and thereby the incurable and ferocious have been restrained from molesting others; and curable patients have been more readily restored. The cases, as I have said before, are rare, where such a course is required, and must be left altogether to the wisdom, humanity and experience of the superintendent.

Whether or not I have succeeded to meet the views of the directors of the New-York Asylum, in the foregoing remarks, I cannot say. The system of government set forth in them, however, is the one I had adopted whilst I had the management of this institution; which I am happy to say was approved by our directors, and by the public generally; and it enabled me, during four years of constant intercourse with my patients, to go in and out among them, unattended and be always regarded by them, as their best friend. I hope that, aided by the lights of science and experience, you will be able to establish such an asylum for the insane as will redound to the honor of your State, and prove a blessing to that unfortunate class of our fellow beings. Very respectfully,

PHILIP J. BARZIZA.

(3.) *ANSWERS to questions propounded by the Trustees of State Lunatic Asylum in the State of New-York, to the Superintendent of the Asylum for the Insane, in the city of Williamsburgh, in the State of Virginia.*

1st. On the 10th day of November, 1769, an act passed the Colonial government, making provision for the lunatics and idiots of the Colony. On the 10th of July, 1770, the court of directors appointed by the Governor and council, held their first meeting. Proposals were received during that year, for building a hospital, and on the 14th day of September, 1773, the building was completed, at an expense of £1,070, and delivered to the directors. The hospital has always been supported by annual appropriations from the treasury of the State.

2d. It was not originally designed for the poor only, but such as had estates were and have ever since been admitted, and charged a

moderate board, out of the nett profits of their respective estates, which is still paid into the State treasury.

3d. The buildings were not designed for an infirmary, but for an asylum for lunatics and idiots. The original hospital consisted of but one building of brick, two stories high, about 100 feet front; a neat pediment in the centre, with apartments for the keeper, and the ends hipped roofs, containing twelve cells each side for patients. In late years two more brick buildings have been erected, 90 feet from each end of the centre building, running north in parallel lines and corresponding in dimensions and appearance to the centre or original building; and within the last two years a third story has been added to the centre building, and a wing 90 feet long, two stories high, has been erected, connecting the centre with the western colateral building, and resembling in appearance at present the Worcester Hospital in Mass. The rooms are 11 by 12 feet. It can now accommodate 120 lunatics, besides rooms for officers and attendants. It does admit of a sufficient classification of patients.

4th. There are at present 66 male, and 40 female patients in the asylum. The hospital having been converted into a military barrack during the war of the revolution, the records kept by the keepers have been lost; and nothing can be ascertained with precision, as to the number of persons received, discharged, or who have died earlier than the year 1827; from which time, a regular record has been kept, a statement of which I expect soon will be published. Two only have committed suicide, to my knowledge.

5th. There are about 20 acres of land attached to the institution, most of which is a recent purchase; cost from \$1,200 to \$1,500, independent of the lots on which the buildings are located. The arable land is divided into lots, and a large culinary garden. It is cultivated by the servants of the institution, and such of the male patients as are disposed to labor. The quantity is not sufficient. Most of our patients are farmers, and could be profitably and advantageously employed on a farm.

6th. The amusements, which are few and lately introduced, consist in cards, backgammon, draughts, marble playing, pitching and music. Our insane, however, are soon satiated with them.

7th. The effects of labor are beneficial every way. Labor, especially in the open air, is conducive to health and cheerfulness, renders insane persons more contented; the mind being occupied in the employment before them, often leaves the subject of hallucination. It encourages sleep, and they are more easily managed.

8th. Patients are admitted by warrants from three justices of the peace. But by recent acts of the General Assembly, the directors are empowered to receive boarders without warrants from justices.

9th. The expenses of supporting the institution, including all charges, are, estimated at about \$4 per week for each patient.

10th. The number of lunatics in the State is supposed to be between 6 and 700.

11th. The officers are, a superintendent, who by a late statute must be a physician. He receives a salary of \$1,666.66 $\frac{2}{3}$ per annum, and is provided with suitable apartments in the hospital.

A steward with a salary of \$750 and fuel, and resides in the hospital.

A matron with a salary of \$450 ; there being no suitable apartment for her in the hospital.

One male assistant, with a salary of \$200, who resides in, and is the only person boarded from the hospital.

We have 12 male and 11 female servants, all black and slaves.

All which is respectfully submitted to the directors of the State Lunatic Asylum of the State of New-York, by

Their most obed't serv't,

PHILIP J. BARZIZA,

*Late Superintendent of the Lunatic Hospital at
Williamsburgh, Virginia.*

V. OHIO.

- (1.) *Letter from Dr. Wm. M. Awl, Superintendent of the Ohio Lunatic Asylum, to the President of the Board of Trustees of the New-York State Lunatic Asylum.*

OHIO LUNATIC ASYLUM, }
Columbus, October 20th, 1841. }

D. RUSSELL, Esqr.

DEAR SIR—Since receiving your favor in relation to the organization of the new State asylum for the insane, at Utica, I have gathered up some six or eight of our reports, and arranged them as I trust, in a manner to give you what information we have published upon the subject. I would, therefore, respectfully refer you to them for information upon many points touching the history of this institution.

We can in some degree understand your situation upon this responsible occasion, for we too have had our troubles and cares and anxieties, whilst the people of a State who had made large appropriations were expecting glorious and fruitful results. But I must not enlarge. Upon the subject of discipline, &c. there can be but one opinion; you must concentrate sufficient power upon one able, responsible, willing and active man, who knows how to perform his duty before God and man. You must find such a man and *depend upon him*, and above all, let there be added to his energy and skill to govern and direct, a pure and undefiled zeal for practical religion, which, tempered with good sense, will enable him to be wise in this great respect, without just cause for offence. Depend upon it, that much will be gained by your starting under favor of the Kingdom of Heaven.

In every point of view, it is important that an enterprise of such magnitude in the great State of New-York, in this enlightened day, should have about it, in it, and all round it, the highest moral and religious character. I do not in the most remote degree think of a sectarian or partizan religion, to which there are high and many objections. I will make but one further remark and then proceed to reply to your series of questions in their order. I have said nothing upon the government best adapted to an institution of this kind, in other words, *the internal police of such an institution*, because I think it useless, for every thing will depend upon the man you place at the head of it; this will be the practice, however the theory. But I will, in addition, make, as I have said, one further remark, and that is in respect to the government, not of the inmates, but of those whose duty it may be to take daily and hourly care of them. The person with whom you trust, almost I may say supreme power, should understand something of human life as it is, and be a judge of men and things, for to ensure a successful enterprise he may find the greatest need for judgment in

the selection of instruction, and management of his cabinet, (*if I may so speak*,) and the long list of attendants and assistants that will necessarily be placed under his direction. There is what may be called the *esprit de corps* of an institution, that must entirely depend upon the commanding officer.

I proceed to the questions :

1st. The Ohio Lunatic Asylum was commenced in 1836, and finished in 1839. It was built by authority of the Legislature of this State, chiefly by convict labor, and cost in round numbers about \$80,000 ; that is, it cost the State about that sum. *The buildings are worth about \$100,000.* It is entirely supported out of the State treasury direct, and we have at present no other calculation than to endeavor to meet public approbation in such a manner as at all times to command what annual appropriations we need.

2d. The buildings were designed for both classes, but the paupers have the preference when the house is full. In the house we know no difference between persons only as they are diseased. The rich, if they come into the house, are obliged to submit to all its regulations.

3d. The buildings are designed exclusively for the insane. Idiots and the sick of every kind, except the insane, are excluded. The institution consists of a main edifice 300 feet long, being a centre building, and two wings built of brick, upon a cut limestone basement and two rear buildings or lodges of 80 feet each, also of brick, together with all the necessary stabling, outhouses, &c. necessary for such an establishment. The patients' rooms are 8 by 10 feet, arranged on either side of a corridor 14 feet wide ; each wing has 3 stories, and each story 22 rooms, all of which are well adapted to the health, comfort and convenience of the patients, each separate room being perfectly ventilated, independent of its window and door. The accommodations are not sufficiently extensive *by half*. I could fill another such building in six months if I had it, and it is my intention to "cry aloud and spare not" until it is obtained. The asylum is not only constantly full, but between 60 and 80 applications constantly pending from the different counties in our State, besides a number from surrounding States (*some from your own State*,) who are necessarily excluded for want of room.

4th. You will find full answers to this in the printed reports. Our common number is between 140 and 145. So far, thank the Lord, we have had no case of suicide.

5th. The asylum tract contains 57 acres, 30 acres of it cost \$1,980, the remainder \$2,925.35 ; it is principally in grass or wood pasture, except 8 acres in front which the patients are grading, and two large vegetable gardens under the care of the patients, who attend to them faithfully, supplying us almost entirely with the smaller vegetables throughout the year. I should have no objections to 20 or 30 acres more in a year or two, but do not think a very extensive tract of land either necessary or desirable on several accounts ; and I believe all now are beginning to admit that, in farming, it is better to cultivate a small quantity perfectly, than a large tract imperfectly and of course improperly.

6th. We have music, books, papers, periodicals, nine pins, chess, drafts, cards, &c. &c. with every thing of the kind common to institutions of this kind in the United States. These things do well enough in bad weather or the winter time. As a common rule, work is better than play, and I think I have generally observed that the work and the play are in an inverse ratio at the different institutions of the Union; in other words, where they play much they work little.

8th. I consider labor of the first importance and consequence in the treatment of the insane, and out-door labor the best kind of labor for the patients. This opinion is, I believe, now considered as confirmed by ample experience. I would not think of superintending an institution without labor for the patients, in season and out of season, whenever any thing can be had for them to do.

8th. Pauper patients are admitted by a special jury under the statute, as you will find in the printed reports, &c. to which I have referred. Pay patients upon the certificate of two practising physicians, with three months' pay in advance, at the rate of \$3 per week, the balance secured by bond with security, &c.

9th. The insane and idiots in Ohio, as ascertained by the late census, are :

Insane and idiots (white) at public charge,	347
“ “ “ private “	797
	— 1144
“ “ (black) public “	47
“ “ “ private “	52
	— 99

10th. Three dollars per week, three months' pay being required in advance.

11th. Superintendent and assistant physician, steward and matron; the others in our employ, together with their compensation, you will find in detail in both of the last printed reports. They are paid quarterly by the steward under the direction of the superintendent. The Treasurer of State is made by law the treasurer of the asylum, and the whole institution may be considered as one of the departments of State, &c. &c.

I am, my dear sir, in the habit of writing off just as I think, and without much premeditation in matters of this sort, and trust you will receive every thing I have said as it is intended, viz. in the spirit of kindness and some zeal for the subject. May God bless your labors and make them profitable, and a blessing to the unfortunate and afflicted in the great State of New-York.

Very respectfully,

WILLIAM M. AWL.

P. S. If possible, I should think it would be advisable to appoint the superintendent at least six months before the reception of patients, that he might have every arrangement complete in season.

(2) *Extracts from the 1st Report of the Superintendent, dated November, 1839.*

Of the twenty seven cases, where patients in this Asylum have been entirely restored to the use of their reason, and returned to society and to their friends "*cured*," the following are selected as examples :

No. 3. A stout athletic man, thirty years of age, became violently deranged, afters ever alweeks of much anxiety and during his attendance on a protracted meeting. He was taken up and confined in the county jail, where he became extremely noisy and boisterous, in which condition he was committed and brought to the asylum. He was so furious and dangerous that we were obliged to place him in solitary confinement. For several weeks previous to admission he had not been shaved nor his clothes changed, those having him in charge being kept in constant fear from his violent threats and frequent attempts to do them injury. He imagined himself King of England, and from this belief was uncommonly arrogant ; gave his commands in the most imperative manner and was much irritated if not immediately obeyed in every respect. We treated him with great respect and kindness, placed him upon proper remedies, and in a very short time he was so far improved as to admit of his removal into the hall with a suitable class of other patients. But he was still "every inch a king" and felt disposed to act the sovereign in every respect, and when introduced to one of the inmates, who himself claimed to be master of the house and every thing that was in it, and who undertook to expostulate with his majesty on account of his boisterous conduct, he replied in the most indignant manner, "that he would not remain an hour longer where such a puppy had authority." By a steady perseverance in the use of proper means his improvement regularly continued, and he gradually became pleasant, less loquacious and more of the republican in his manners. He soon showed a disposition to be useful and was pleased to assist the attendant in many of the duties of the hall, admitting in the most pleasant manner that "his majesty could take the place of a vassal without inconvenience." We had the pleasure to meet him shortly afterwards, whilst he was engaged in making up the beds. There was a playful smile upon his countenance. The eye was calm ; we both understood in the same moment, *that the crown was lost*, and had a hearty laugh at the humble employment to which his majesty was reduced. In a few weeks he was entirely restored and left the institution cheerful, contented and happy, and has since written us several letters, expressive of his gratitude and the great benefit which he had received.

No. 4. Was a married lady about twenty-eight years of age. Domestic trouble and improper medical treatment had caused great mental anxiety which finally terminated in complete mental derangement. When admitted into the asylum she was a furious maniac, abusive, vulgar and destructive. From examination it was found that she was suffering severely from local disease of a peculiar character, which kept up a constant irritation and doubtless had great influence in the promotion of her obscene, abusive and profane language. She sang, laughed, talked, cried, screamed and swore, almost in the same breath. Not-

withstanding her vulgar language and conduct, she was neat and cleanly in her person, and would often demand water, soap, brush and broom to keep herself and room "decent," as she would term it, vociferating loudly at the same time and threatening to knock down and kill the first person who should dare approach or contradict her. Her local diseases were properly and promptly attended to, other remedies were administered and a steady perseverance produced the desired effect. Her disease of body and mind gradually yielded, a visible improvement soon commenced and continued until she was entirely recovered and discharged. From a complete wreck of every thing desirable we had the pleasure of seeing her restored to perfect reason, a modest, pleasant and agreeable woman, repeatedly expressing her gratitude for the kind treatment she had received, and fully sensible of the great change wrought in her mind and health, after coming to the asylum. For several weeks previous to her leaving the institution she was remarkably industrious, knitting, sewing, &c., wishing in every way to prove the gratitude which she felt, and leave as she said "something behind which would remind us favorably of her when gone."

No. 7. This was a widowed lady of great moral worth, who for twenty years or more, has been subjected to occasional attacks of insanity of the most violent and extraordinary character; at which times she is wholly beyond control, and a source of anxiety and alarm to her friends and the neighborhood. When sane, she is very intelligent; has a sweet, amiable disposition, and is respected and loved by all her friends and acquaintances; but the accounts which we have received of her extravagant behavior during these periods of excitement, are truly wonderful and alarming. A gentleman of intelligence informs me, that on one occasion being near her dwelling, he suddenly heard her wild shout and maniac laugh—when, to his utter astonishment, he beheld her swinging a beloved child in the air, with an outstretched arm, from the third story window of the house! We had great difficulty in getting her to consent to come into the asylum, and her conduct was exceedingly wild and furious for some time, particularly when she ascertained to a certainty that she was to be under control and confined to the institution—demanding to know by what authority and whose orders she was restrained and deprived of her liberty. We visited her room, and after some little time requested her in a calm manner to be seated and we would endeavor to explain and talk matters over. She consented, and we proceeded in the most plain and candid way, to explain every circumstance in relation to her committal and detention, and the motives and objects in view. She listened with great attention appeared thoughtful and very much surprised; saying to herself, "then I really am crazy, and in the asylum! Well, sir," she continued, "you are a gentleman, and I thank you for your candor, and now in return, I will just show you how a lady ought to behave." She was as good as her word; for from that moment to her final recovery and discharge, we had no further trouble.

No. 10. Here was a rare genius that had seen hard times in the county jail, where his feet was so badly frozen that he could neither walk nor stand. He made his appearance at the asylum in a yellow

flannel shirt and greys, drooped roram and bearskin roundabout ; dirty as a beast and odd as a buffoon—took command of two antiquated females in the lodge, with whom he occasionally received his food. These he faced to the right and left about, with great humor and authority, informing them with a flourish in the air, that he was intimate with the king of darkness, whom he familiarly addressed as **UNCLE ZED**, and with whom he appeared to have much business and many earnest conversations. He seized his food with the rapacity of a wolf, and tore it to pieces with his teeth ; denominating himself a "*wild varmint*," and requesting to be fed on "*sassafras and spicewood*." To fill the character, he was a thief both by profession and inclination ; and when no other opportunity occurred to gratify this propensity, he not only stole the food and clothing which was designed for him, but he loved to hook out of one pocket for the sake of slipping it into the other. We treated him kindly, bound up his feet, regulated his diet, and allowed him restoratives and the proper medicine. He became a favorite, dropped his wild notions and evil propensities by degrees, was taken into the house, and soon began to recover quite rapidly, though it was sometime before he entirely got free of delusions ; and what was not a little remarkable, he suddenly cut acquaintance with his satanic majesty, and desiring to become an **ARCHANGEL**, was an office-hunter who calculated a great way ahead, for he expected the honor of "*blowing the resurrection trumpet*." He entirely recovered, and went on his way rejoicing.

No. 26. Was a village girl only 16 years of age. When admitted she appeared to be in a hopeless state of dementia, the only intelligible words she could or would articulate, was "*give me bread*." Her countenance indicated the greatest imbecility. She neither took notice of surrounding objects, nor answered a question direct when addressed, remaining quite still wherever she was placed, and allowing the flies to cover her face and hands, not even making an effort to drive them off, or seeming to know that they, or any thing else was about her. She was entirely incapable of feeding herself, paid no attention to her person whatever, depending like an infant for all her wants upon those who had her in charge. So wretched was her appearance and condition, and so few the remaining traces of her mind, that for some time her case was regarded as utterly hopeless. Every effort was made for her personal cleanliness and comfort, and such remedies as were deemed suitable were given, and her diet properly regulated ; but for many weeks there was no visible alteration. At length her dormant and morbid sensibilities seemed to arouse, her appetite began to mend, a rapid improvement commenced, and continued until she was entirely restored—health and strength good, mind sound. When she first attempted some little domestic duties in the galleries, we expressed our pleasure and encouraged her to persevere ; she like a child was very much pleased, asked for knitting, &c., gained strength rapidly, and before she left was quite industrious ; realized fully her situation ; often spoke of her insanity ; told us how she behaved before coming to the asylum, and that it was all caused by a sudden fright.

No. 21. A native of Scotland, and graduate of one of her distinguished universities. Soon after emigrating to this country he became a teacher, and devoted his time to the cause of education—he was studious, became gloomy; was disappointed in some expectations, and finally became completely deranged. Of an ardent temperament and lively sensibility, he was suspicious in regard of the motives which influenced the actions of some of his friends. His prejudices were uncommonly strong, and his insanity displayed itself in extreme dislike and animosity towards his relatives, who had treated him with kindness and affection. Melancholy, dissatisfied and suspicious, he thought the whole world was against him, and amongst other morbid fancies, believed that his friends had given him “some oblivious drug, or damnable stuff, to steal away his brains.” When received into the asylum, he appeared to be absorbed in the contemplation of his own morbid feelings—would pace the hall up and down with rapid strides—shake his head and grit his teeth, as if in defiance, or the contemplation of some awful resolution. The stronger feeling appeared to be revenge, and he would ask, in the most imploring manner, to be released and furnished with some weapon, by which he might reach the supposed author of his calamities. It was many weeks before we could discover any improvement, but under an appropriate treatment and cheerful associations, it at last commenced and gradually continued, until his excellent mind was entirely restored. The natural feelings of his heart returned; he was kind, amiable, and affectionate, and a gentleman in his appearance and manners—evinced by his conversation and writing great intelligence, and much reflection, and for his fellow inmates the deepest sympathy; ever ready to assist in ministering to their wants, and to soothe and cheer them when troubled or depressed. There was a tear in his eye when he left the institution, and his heart was full for the kindness he had received far from his native land.

(3.) *Extracts from the Superintendent's 2d Annual Report, dated November 15, 1840.*

RELIGIOUS SERVICES.

Through the blessings of Almighty God, we have been permitted to continue our regular family worship every evening in the week, and the reading of a short sermon on the Lord's day; not only without interruption from the patients, who, to the number of thirty or forty, usually attend; but with the most happy influence and positive benefit to many of our patients and the large family of officers, attendants and assistants, connected with the institution. At first, it is true, we had some doubts concerning the necessity and propriety of daily religious exercise for the insane mind, and the difficulty of conducting the service appropriately, appeared great; but we felt constrained to make the experiment, through a strong sense of duty; and the experience of two years has abundantly satisfied our mind upon the subject.

In the wreck of mind and loss of reason, perhaps the very last ideas which remain will be something of the reverence and respect which is

due to the "Maker of our frames;" and it is not at all uncommon to see the aged and demented Christian reverently bend the knees, when years of darkness, to all human appearance, have shut out all correct knowledge of earth and heaven.

HINTS TO THE FRIENDS OF PATIENTS.

By reference to the tables, it will be seen that the ordinary time required for the cure of insanity, under favorable circumstances, is from four to ten months. We feel the necessity of pressing this fact upon the attention of the friends of the afflicted, who, not aware of the chronic nature of the disease, occasionally become prematurely anxious for their removal from the institution. In connexion with this, we would respectfully observe, that there can scarcely be too much caution exercised in visiting or writing to those who are suffering under a disease of the mind. From painful experience, we should select the imprudent and unseasonable presence of a near and dear friend, as the very hardest trial to which an insane mind could be exposed: and long and tender letters containing some ill-timed news, or the melancholy tidings of sickness and death in the family, may destroy weeks and months of favorable progress. As a common rule, letters to the insane should be short and encouraging, and the county newspaper with the name of the friend written on the margin, in many instances, will be a most valuable substitute.

As reason dawns upon the benighted mind, and the convalescing state becomes apparent, an intense anxiety is felt to hear from "*home, sweet home!*" with all its endearing and tender associations; the mind is then impatient of further restraint, and unwilling to submit to the probationary process which is necessary to complete and establish perfect recovery: this imposes a very important and painful duty upon the superintendent; and it is in these circumstances that a prudent forbearance on the part of relations and friends, is essentially desirable and useful.

In connection with this subject we cannot forbear one further remark, which, we earnestly hope, will receive attention. It is in reference to the practice of making false promises, or using deception of any kind, in order to induce insane persons to leave home and come to the asylum. This has a tendency to excite suspicion and prejudice against the officers and attendants of the institution, to a degree that may greatly lessen their influence, perhaps entirely destroy the effect of a whole course of treatment. And we have some melancholy examples of bitter aversion against parents and friends, thus produced, which neither time nor attention can entirely remove.

SELECT CASES. 1840.

We proceed to the description of a few leading cases, with some remarks:

No. 65. A remarkable case, on account of the extraordinary character of the prevailing ideas, which, for the most part, consisted of imperfect reminiscences of past events, combined with the most absurd

and superstitious delusions that a morbid fancy could possibly suggest. She was the widow of an enterprising young farmer, who removed west with the laudable design of improving his condition and making a comfortable provision for a rising family. A native of Scotland, and a lady of unusual intelligence for her opportunities, she was quite prepossessing in her manners, and pleasant and sociable in her disposition; very strong in all her attachments, and a strict and worthy member of the church.

The attack occurred shortly after the birth of a child, and seemed to be immediately occasioned by excessive grief for the loss of her husband, together with the hardships and privations incident upon their location in a new and unhealthy settlement. Her derangement was melancholy and despair, with scarcely any of the active symptoms of violent and open mania. But it is almost impossible to sketch even a general outline of the various hallucinations for which the case is chiefly remarkable. The most prominent appeared to be that she was a hypocrite and a devil; that her excellent husband was a notoriously bad character, to whom she had been illegally united; that she was, in fact, the wife of another and very different person; that her own dear mother was base, and neither she, nor her brothers and sisters, were the legitimate offspring of their reputed father; that she was a serpent, and washed herself in the blood of her husband's heart and mother's liver; that her proper place was hell, and she had sealed her condemnation by refusing to read the license for her marriage, which had been offered and pressed upon her attention by her husband, who made use of every argument to convince her of the impending doom, assuring her that his eyes had been opened by looking upon the paper, and she would find that God himself was opposed to their marriage, which would inevitably bring a curse instead of a blessing, both to themselves and friends; and representing to her, above all, that their situation would be similar to Adam under the covenant of works; and numerous equally shocking and ridiculous compounds, that it were improper and indelicate to mention. The great leading idea seeming to be that she had gone astray in the light of duty, and was prematurely in the reception of the wages of sin.

It may be here observed, that, as a general rule, the decline and removal of delusive impressions will depend upon the cessation of morbid excitement and irritation, and the perfect restoration of all the functions of the system to health. In curable cases, we commonly prefer to avoid the delusive subjects entirely, until there is a favorable change in the general health, unless they are pressed upon our attention, when we meet them with such discretion and judgment as circumstances may seem to require.

With all these painful and tormenting associations and delusions, this estimable woman was a kind, affectionate and submissive patient, and uncommonly industrious, being anxious to recover her health and serenity of mind, and at the same time render herself useful and agreeable to the unfortunate persons around her. She was a long time under the operation of medicines calculated to control irritation, and restore and invigorate the nervous system; and we ultimately had the

pleasure of restoring her in health to her little family of helpless children, grateful and happy for the benefits received whilst an inmate of the institution. Since her discharge, she concludes a letter in the following words: "My mind is now so well recovered, that I feel willing to press on in the way of duty, and leave the event to God. And accept my humble thanks for your kindness, and believe me your affectionate friend," &c.

No. 71. The exciting cause was quite of an opposite character in this instance, which was distinguished for its activity and violence. The patient was a young widow, with a lively sparkling eye and interesting countenance, who had always enjoyed good health and spirits, and was industrious, almost to a fault. After the loss of her husband, and a series of misfortunes and domestic troubles, she suddenly became "excited and almost frantic," with the unexpected intelligence of the recovery of an only daughter. She was brought to the asylum two months after this event, in a complete state of mental derangement; raving, reckless, headstrong and desperate—a perfect fury; vulgar, profane and abusive; with a determination to do as she pleased, and "go her own road, if it led to *Jamaica*," stating at the same time, in a spirit of defiance, "that she was not to be conquered, as a number had already found, to their everlasting sorrow."

Usually, general intellectual and violent mania of this description is more easily managed and overcome, than the lesser shades of partial derangement. Under present circumstances, we had for a time to submit to considerable abuse and violence; but we were decided about matters, and took the right course; she was put under the influence of active remedies, which soon began to display their power in calming

"The wild frenzy of the brain,"

and we had the satisfaction of beholding the transformation of the diseased fury into a healthful woman, regaining her own natural countenance, with every prospect of returning health and reason, which was all duly accomplished, and she left us, happy, thankful and delighted with the pleasing change.

No. 67. This patient, a little past the prime of life, had been the subject of mental alienation about three months previous to the time of his committal to our care. Possessing an excitable temperament and a mind in which the susceptibility to emotions was not counterpoised by a strength sufficient to sustain their excitement, the invasion of strong religious feeling, together with disappointment in an "affair of the heart," at once submerged the intellect in their tide. When first brought here, he was listless and inactive, careless as to his bodily habits, and giving no attention to any thing around him. A continued whistle, or hum, was the uninterrupted employment of each successive day; and for months, this dull, sad monotony was unbroken. All signs of mental existence, much more of mental activity, seemed equivocal. Mind had sunk so near to a state of imbecility, that no consciousness of previous years, with their active habits, exciting scenes, and family endearments, remained. The mind that had engaged with activity and

interest in the pursuit of an honorable employment, and the heart that had cherished, with all the fondness of a parent the warmest emotions of affection, seemed now unlighted by intellect, and unwarmed by a single sentiment.

After the most judicious efforts to restore the bodily functions had at last proved in a great measure successful, a shade of change for the better gave encouragement to persevere ; but, thus far, it had been labor uncheered by hope. The first indication of the least interest excited in his own condition, was the displeasure manifested toward a pair of "*hard times*" with which his nether limbs were invested. As soon as mind had awakened to the consciousness of its own existence, the novelty of the scene around him excited his inquiries, as to where he was ? how he came here ? and for what purpose ? and when satisfied on all these points, he manifested the surprise of one aroused from a dream. His trunk was brought to him, and in turning over, with curious interest, its contents, some simple token of a daughter's affection struck his eye, and, at once, the sealed fountain of emotion found vent in a flood of tears. The recollections of the past, that had been crowded from his mind, rushed in to fill up the dreary waste which their exile had made, and with remembrance came affection and intellect.

From this time, he continued rapidly to recover, making frequent and anxious inquiries concerning his family and friends, taking a deep interest in his own progress, and expressing the warmest gratitude to all who had in any degree contributed to its happy consummation.

No. 69. To use a grand flourish, in his own peculiar style, this was "*jist about the keenest cock that ever was gaffted on the Sun-fish hills.*" He certainly "knew a thing or two," besides being able to "put out fire with his breath, by blowing upon a burning house !" and in the full tide and action of disease, was quite a striking character. Dreadfully in love, and careless about himself and every thing in the world, except his clothing, in regard to which his fancy ran, that he was as well off, if not better, without any at all. A coat was perfectly out of the question, and he commonly disposed of the *cotton* and *unmentionables* without much ceremony, and by the most convenient process to suit his humor. The sheriff had, amongst other matters, provided him with a pair of coarse pantaloons, of unusual capacity and strength, the quality and cut of which took our attention, and, aware of his destructive inclinations, we immediately commenced speaking their praise, remarking, aside, that these were the right sort of pants. "Well," said he, "*stranger, they jist about are.*" We at once became interested in the cloth, and began to inquire as to the purchase, price, and tailor's name ; desiring him at the same time to turn about and show them all round ; and asking him, in the most earnest manner, if they set easy ? "Well," said he, "*stranger, they jist about do ;*" which was just about the amount he felt inclined to say in a strange place. As to the *invincibles*, they, *by our particular direction*, soon became the admiration of every man engaged about the house, and eventually grew into such favor with the owner himself, that he felt inclined to stick to them night and day ; particularly after we had slyly insinuated, that he was surrounded by a slippery set of fellows, and, as good looking trousers

were much in demand, he had better keep a sharp look out. He improved on further acquaintance ; became quite familiar, and eventually took such a fondness for dress, that he was not only willing to wear his own clothing, but those of any other patient that would agree to exchange. Other pranks and mischief followed, until a shower-bath became indispensable, which, being altogether new, alarmed him exceedingly, and at once put an end to every caper in his head. His fright was quite amusing, for he supposed we were about to drown him, and sung out, at the top of his voice, "Oh, doctor ! for God's sake let me out ! I can't swim a stroke !"

Medicine had a speedy and happy effect upon his vigorous and hardy constitution ; and he was soon able and willing to labor daily, and entirely recovered the full use of his somewhat droll and eccentric faculties.

No. 68. Was a lady, near the prime of life, whose insanity was of puerperal origin, and of two months duration at the time of her admission into the asylum. At first, a cheerless listlessness, amounting almost to the hopelessness of imbecility, was the prevalent feature of her case. For some weeks after her entrance, she could not be induced to converse, or observe any thing around her ; but sat in listless silence, regardless of all the attentions bestowed upon her, and apparently desiring to exclude all observation. At last, by perseverance in all the appliances of kindness which her situation required, she could, by earnest solicitation, be induced to raise her head, yet with a trembling becoming the lowest humility. Her natural simplicity of character had, by the invasion of insanity, degenerated into the merest childishness, characterized by even more than a child's timidity. To this was added a most depressing despondency, darkened by the gloomy forebodings of a religious melancholy. With this saddening companionship of unhappy illusions, the mind retired into its gloomy recesses, and there seemed to brood over its woes ; and, for a time, every effort to drag it from this cheerless contemplation seemed fruitless. But perseverance at last secured the slight change alluded to, and a gradual improvement continued to reward our labors. By degrees, the dark shadows which melancholy had projected on the countenance began to disappear, and joy to relumine with its smile the cheerless despondency ; and, over all, returning reason began to assume its wonted sway. She was first induced to engage with freedom in conversation ; then, to employ herself in knitting, and, by slow degrees, her interest extended to things around her, early begetting a warm attachment for her attendants. At last, there seemed the trembling suspense between hope and fear ; between an humble faith, that almost feared to trust, and yet, casting away despair, dared to hope ; and she was heard to repeat these simple lines, that were the very embodiment of her feelings :

" I am a stranger here below,
And what I am, it's hard to know ;
I am so vile, so prone to sin,
I fear I am not born again.

"When I experience call to mind,
My understanding is so blind,
All feeling, sense, seems to be gone,
Which makes me think that I am wrong.

"I find myself out of the way,
My thoughts entirely gone astray;
Like one alone I seem to be,
Oh! is there any one like me?"

To this date she refers her first consciousness of her true situation, and from this period her improvement was rapid and uninterrupted. Anxiety and affection for her friends and children returned. She attended, with pleasure and interest, the religious services of the house, and on the Sabbath was in her place, undistinguished, attending on the public services of the sanctuary. She left us, with a heart swelling with gratitude to the God of mercies, again to fill the place of an affectionate mother and devoted wife.

No. 12. This was a young gentleman, of fair complexion, light make, and modest appearance, about twenty-one years of age. For some months he had been a student in college, and was of good repute amongst his fellows; unexceptionable morals, and disposed to make the most of his time and opportunities. From indigence, or some other cause, he had attempted to board himself, subsisting for several months upon the most frugal and coarse fare, chiefly bread and water. The subject of religion engaged much of his attention, and it was said that he suffered greatly from mental perplexity and anxiety upon this subject; at one time, strongly impressed with the conviction that he had forfeited every hope of redeeming mercy, by the commission of the unpardonable sin. Subsequent to these feelings of distress, he had an acute attack from a disease of some violence, and passed many sleepless nights and anxious days. Upon his partial recovery, he applied for admission into the church, and was received, there being no suspicion of mental alienation. It was remarked that he was unusually loquacious and zealous on religious subjects; very soon, he was a violent theologian; then, an inspired angel, and, in a short time, completely deranged. When received at the asylum, he was furious, profane, obscene and filthy, and disposed to abuse his person and clothing; dancing, singing, whistling, swearing, shouting and muttering incoherently, in rapid succession. We were obliged to place him in solitude in one of our strongest rooms, and, when left to himself, he became if possible, more violent and shocking in conduct than before; destroying his clothing, and tearing up his food like a beast, and smearing it over his person in the most disgusting manner. Medicines were administered with great difficulty, and, for many days, appeared to be of little service in controlling the violence of his disease, which almost immediately was disposed to relapse the moment it began to yield. A variety of means were tried, with little or no benefit, and we began to despair of permanent relief, when we happily discovered both the difficulty and cause of his intractable malady, and were able, by the persevering use of suitable means

to restore him to health, and reason, and prospects of usefulness in society.

OLD CHRONIC CASES.

Incurables demand our warmest sympathies and most tender regard; and to a vast majority of these, the blessings and comforts which the institution confers exceed, if possible, all the good of the most perfect recoveries; which was, doubtless, a part of the design in the erection of this noble structure. We are always indeed trying to cure; our second great duty is to take care of those that are past cure, and make them comfortable, happy, and useful to themselves and others around them. They must form an extensive class in every public institution; and the visiter, in passing through this asylum, will find many, who, for years, had been violent, unmanageable and wretched, naked and filthy, now decently clad, industrious and civil, and in the enjoyment of all the outward comforts and blessings of life.

The following examples, we trust, will be interesting:

Mrs. E——, is about fifty years of age, and in many respects, quite an interesting and remarkable woman; lively and talkative, her animated countenance and lady-like appearance is sure to attract attention and excite the sympathies of every feeling heart. She usually carries a book in her hand, and is very obliging with a song of the olden time, particularly "*Highland Mary*," and Campbell's simple, but touching ballad of "*Lord Ullin's Daughter*," which she occasionally sings with much taste and feeling. Her favorite stanza—

"O! haste thee, haste! the lady cries,
Though tempests round us gather;
I'll meet the raging of the skies,
But not an angry father."—

Her pleasing vivacity and kind disposition are thus exhibited, while you are perhaps busy in examining the strong line of character, and lamenting the ruins of her once fascinating and accomplished mind. She has been deranged a number of years, and is the widow of an officer, who did his country some service. It is not at all probable that she can ever recover the use of her mental faculties; but she has greatly improved, both in appearance and disposition, and though still occasionally excited and rude, is comparatively happy and contented; with few wants beyond a cheerful cup of tea, her spectacles and bible, and pleasant companions.

Mrs. C——. This was a most dreadful and furious maniac, who, after having been chained some twelve or fifteen months, in a public institution, was taken into the country and shut up in a cell, or dungeon, for five or six years, in the worst possible condition; noisy, filthy, and degraded. She was brought to the asylum by force, in a strong wagon, bound down in a straight jacket, with straps and ropes; screaming, swearing and shouting at every person she could see. Al

efforts to control her wild fury, or induce self-restraint, were entirely disregarded, and there seemed for a long time no hope of relieving or improving her sad condition. At length we resolved to command such assistance as might be necessary, and commence and persevere with active remedies against every opposition. She almost immediately became more composed, and in a few weeks, was entirely under control, so as to allow us to improve her dress and appearance, and direct the administration of her food and drinks. In a month or two, she was quite sociable, and willing to hear a proposition for her removal from solitude in the lodge, to good company in the house, where she was promised a clean bed and a pleasant apartment. She was a little wary and suspicious at first, but, with some persuasion, eventually consented to take an arm, and accompany us over. Here she was much surprised, but delighted with the appearance of the halls, and soon became attached to her attendant, and made an offer to assist her with the work. At this time, she is very industrious, neat and careful, and has become perfectly docile and harmless, though still entirely deranged.

Mr. W——, is a gentleman who has been more or less insane for a number of years, and was a source of much anxiety to his neighbors and friends. As early as 1823, he made an unsuccessful trip, with produce, down the river, where he suffered much from an attack of fever, which greatly impaired the strength of his mental powers. Since that time he has, in many respects, acted imprudently and unwisely. His friends think he has never been the same man, in habits and business capacity, since this unfortunate adventure. At the time of his admission, he was completely deranged upon the subjects of politics and religion; believing, in regard to the one, that he was endued with power from Heaven to raise the dead, perform miracles, heal the sick, and converse with departed friends and disembodied spirits: and of the other, that the destinies of the General Government rest upon his shoulders. He has, accordingly, been severely engaged in defeating the fancied designs of several distinguished politicians, especially, General Jackson and Henry Clay; considering them dangerous to the welfare of the nation in general, and certain plans of his own in particular. Other delusions exist, of a superstitious character. He was greatly dissatisfied with those who were instrumental in procuring his commitment to the asylum, insisting from day to day, with great energy and zeal, that he had no opportunity to defend himself before the jury of inquest, and that the whole proceeding was conducted improperly and unfairly. Wearied at length, with his everlasting din upon this subject, we one day asked him how he would like to refer his case to a select jury. He was delighted with the idea, and quickly replied that it was the very thing he had so long desired. We told him it was the easiest matter in the world, and immediately requested him to pick one man, and we another, and so alternately, until each party was satisfied; at the same time asking permission, on our part, to be represented by counsel, which was cheerfully agreed to; and we all prepared for the trial without delay, having, on the part of the institution,

engaged the services of a loquacious gentleman in the same class, who was willing and every way qualified to do us justice. The jury were perfect Solomons. They were duly seated, and the case opened with a speech of unusual length and variety, from our complaining opponent, which was succeeded by an equally able one in reply, from our attorney. The jury, at last, were permitted to retire, and after extraordinary deliberation, returned their verdict in writing, declaring, as their united opinion, "*That he ought to stay where he was for three months longer?*" What arguments led to this unexpected conclusion, we never could exactly ascertain; but it was a woful disappointment to the unlucky plaintiff, who solemnly declared it "the most botched piece of business that ever happened since the creation of the world," and "the foolishlest jury that ever got stuck together."

Under the constant use of medicine, this man has considerably improved, and of late, has shown some disposition to become useful. A recovery is even yet possible, though we think it exceedingly doubtful, and have the strongest reasons to fear that his derangement must be permanently established.

(4.) *Recapitulation of cases for the year ending Nov. 15, 1840, in the Ohio Lunatic Asylum.*

Whole number of patients admitted, 258

Males, 140

Females, 118—258

Old cases, 170

Recent do. (*less duration than one year*), 88—258

Paupers, 201

Pay patients, 57—258

Single, 135

Married, 100

Widows, 6—258

Whole number discharged,	{	Recovered,	80
		Improved,	3
		Incurable,	13
		Idiotic,	2
		Died,	22—120

Whole number of old cases discharged,	{	Recovered,	21
		Incurable,	16
		Died,	14—51

Whole number of recent cases discharged,	{	Recovered,	59
		Incurable,	2
		Died,	8—69—120

Per cent of recoveries on all cases discharged,	66.66
Per cent of recoveries on all the old cases discharged,.....	41.17
Per cent of recoveries on all the recent cases discharged,.....	85.50
Number in the Asylum at the end of last year, { Males,	61
	{ Females, 53—114
Number admitted the pre-sent year, { Males,	53
	{ Females, 48—101—215
Average number for the present year,	131
Per cent of deaths the present year,	10.68
Proportion of deaths the present year,	1 of 9.35
Number discharged the pre-sent year, { Recovered,	53
	{ Improved, 2
	{ Incurable, 9
	{ Died, 14—78
Number of old cases discharged the present year, { Recovered,	14
	{ Incurable, 9
	{ Died, 11—34
Number of recent cases discharged the present year, { Recovered,	39
	{ Incurable, 1
	{ Died, 4—48—78
Per cent of recoveries on the cases discharged the present year, 67.94	
Per cent of recoveries on the old cases discharged the present year,	41.17
Per cent of recoveries on the recent cases discharged the present year,	88.63
Present number in the asylum,	
Males,	73
Females,	65—138
Old cases,	119
Recent do.	19—138
Of those remaining,	
The prospect seems to be favorable for	20
" " doubtful "	19
" " unfavorable "	65
do. — (but improved)	34—138

Duration of insanity, before admission.

	1839.	1840.
Less period than one year,.....	43	45
From one to five years,.....	67	38
“ five to ten years,.....	22	8
“ ten to twenty years,.....	16	7
“ twenty to thirty years.....	6	1
Unknown,	3-157	2-101

IF The disproportion of cures between old and recent cases, confirms the fact, that the earlier a case of insanity is treated, the greater the prospect of success. This fact cannot be too strongly impressed upon the public mind.

VI. SOUTH CAROLINA.

- (1.) *Letter from Dr. Parker, Superintendent of the Lunatic Asylum, at Columbia, S. C. to D. Russell, Oct. 27, 1841.*

1st. The Lunatic Asylum at Columbia, S. C. was established by an act of the Legislature, passed Dec. 1822; it is therefore a State Institution, but open to patients from any state. It also receives foreign patients, reserving the right however in all cases, to patients within the State, who claim a preference should the house be full.

The Legislature appropriated a sum sufficient to pay for the buildings, and the necessary furniture and appendages to the establishment; which sum did not fall far short from the commencement of \$115,000. At this time the institution supports itself.

2d. The Lunatic Asylum was established for the insane of every grade, idiots and epileptics. The buildings consist of a large centre building of brick, with ample wings of the same materials, calculated for the accommodation of from 90 to 100 patients, including a basement story used for the domestic purposes of the house. Two spacious halls, the one used as a mess room for the female patients, the second used for the same purposes for the male patients. In the wings of the basement are suitable dormitories and other conveniences for unclean idiots or epileptics, it being in many cases impossible to disinfect their rooms on the upper floor of the building.

The patients are classified, and accommodations furnished in proportion to their means and desires. We receive pay patients of the better class, from \$250 per annum up to \$750. For the maximum price, a private keeper is furnished such patients. His private table, a private parlor, and bed room with the necessary appendages, such patients is made as comfortable as the nature of circumstances will permit. The rooms appropriated to this class are spacious, well aired, and in every particular a genteel furnished apartment, and from 19 to 20 feet square. For the minimum prices, accommodations are furnished in proportion. The State reserved the right to send all the pauper lunatics within its limits to the asylum at \$100 per annum, which charge is levied upon the commissioners of the poor, of the district, from which such case is sent. This sum, after very ample experience, has been found insufficient to support a pauper lunatic, including his necessary clothing, &c.

3d. There are now in the asylum, 29 females, and 32 males. A series of years has exhibited little difference as to numbers of the two sexes. The records of the institution show an increase of females some years; but the average for several years together, exhibits very little palpable difference, on this particular head. The number of patients of both sexes, have varied from 60 to 80 in each year.

The number of patients discharged in each year has varied from 12 to 15. The number of *cures* cannot be stated with any accuracy, as

patients are frequently removed during the year, as they approach to improvement, and are never again heard from. The cases of *mania á potu* has been many, and some very violent. These cases are in every instance cured. The number of deaths in each year, will average from 5 to 10. But under the circumstances, the deaths are not in a larger proportion than the same population elsewhere.

Suicide does occur occasionally by hanging, which cannot be prevented by any police, when the patients determine upon self-destruction. The cases with us during the existence of the asylum, number 6 or 8.

5th. The quantity of land cultivated for various purposes, say vegetable garden, small grain, &c. &c. is 4 acres on which the asylum is built. This includes flowers and vegetable garden. Play ground for the female and male patients, which are separated by a brick wall, and the necessary yard for the convenience of the establishment; add to this, about 30 acres, cultivated by the pauper patients, more for the purposes of salutary exercise for the patients, than with the view of profit to the institution. This labor furnishes corn, peas and other small grain, but not in the quantity sufficient for the use of the house. Since this mode was adopted to exercise the pauper patients, which are those only who labor in this way, the mortality amongst this class has greatly lessened.

6th. The amusements of the patients are various, and regulated by their former habits. Walking, riding, exercising on the grounds, and music form their principal amusements. Exercise and recreation always prove beneficial, and are actually called for to preserve their bodily health.

7th. The patients are admitted to the asylum, by a form prescribed by law, to wit: Whenever application is made for admission it must be by the husband, wife, or next friend of the lunatic, accompanied by a certificate under the hand and seal of a justice of the quorum, and two regular practising physicians, or surgeons, who are compelled to set forth in said certificate, the lunacy of the party; and that his enlargement would be dangerous to society. This certificate being referred to the visiting regent for the month, the terms are agreed upon, and the patient is received into the house. Where he can only remain 10 days, before his case is examined before the *board of regents*; (by the physician,) when he may either be discharged if decided not to be insane, or finally detained as a lunatic. This precaution is used to prevent cruelty or imposition. The *Board of Regents* reserving the right to be the judges, notwithstanding the legal form, furnished with the patient on his entrance.

8th. It is impossible to answer your *ninth* interrogatory; as no estimate could be formed of the number of lunatics, and idiots in the State. The great repugnance that is felt in the better classes to send their friends to lunatic asylum, together with the privacy of such family afflictions, would make such estimate inaccurate and impossible. The number of pauper lunatics supported in the asylum at this time by the State, are thirty. Lunatics are not permitted to go at large; as it is in the power of any citizen by affidavit, to obtain an order from

any judge, of either court, to send to the asylum such lunatic, or lunatics, provided he swears, that his enlargement would be dangerous to the community. Such person, if able, would pay for his maintenance in the asylum. But if a pauper, he would be chargeable to the commissioners of the poor for the district in which he lived, at the rate of \$100 per annum, by act of the Legislature; which sum, they are bound by law to pay, half yearly in advance, during the stay of such pauper in the asylum.

9th. The expense of supporting a patient will vary from \$ to \$ in proportion to the revenue levied from each class, and the specific agreement.

The paupers, diet *all* at one table, and are supplied with wholesome, plain food; including all the vegetables of the season, produced upon the grounds, partly by their own labor.

The male patients *diet* separately from the females, in different rooms, but at the same hour.

The pay patients have their meals either in the apartment appropriated to them, or at the table of the superintendant and his family, according to the circumstances of the case.

10th. The institution is governed by *nine* Regents, elected by the Legislature every six years. The board fill their own vacancies during that period. At the session of the Legislature in every year, they make a report to that body, and an account of their government, members, patients, &c. &c. no pay. The officers of the institution are,

A superintendant with a salary of \$1500, together with maintenance and apartments in the house for himself and family.

A matron, with salary of \$250.

5 male keepers, salary each \$200.

2 female do. do. do. \$200.

8 servants, cooks, waiters, &c.

The officers and servants are paid by the Regents, out of the revenue of the house, as well as every other expense incidental to keeping up and maintaining the institution.

Very respectfully, your obedient servant,

J. W. PARKER.

Superintendent, Lunatic Asylum, S. C.

VII. MARYLAND.

ST. VINCENT'S LUNATIC HOSPITAL.

The committee of the trustees visited the city of Baltimore, without having heard of this newly opened private institution, in that city. It is in its infancy, but promises extensive usefulness. It belongs entirely to the "Sisters of Charity," a small but noble band of pious, self-denying women, of the Roman Catholic faith, well known and beloved for their ministrations of kindness to the poor, and especially to the *destitute sick*. The trustees have great pleasure in being permitted, through one of their number, to lay before the Legislature, and the public, the following most interesting letter from W. G. READ, Esq., of Baltimore, giving some account of this new asylum, and exhibiting some of the valuable results of these "Sisters'" long experience in treating the insane :

Baltimore, November 10th, 1841.

MY DEAR SIR :

Yesterday afternoon, being the first time I could command since the receipt of your favor of the 2d instant, I proceeded to St. Vincent's Lunatic Hospital, belonging to the Sisters of Charity ; and I now hasten to lay before you the memoranda of a very interesting conversation with the Sister who is charged with the direction of that establishment. I feel, however, that a person more intimately acquainted with the subject, would have gathered for you more copious and valuable details. This institution is in its infancy, having been recently purchased by the Sisters, who had, for several years, been charged with the care of the lunatic patients in the Maryland Hospital, in this city, where they were eminently successful, but from which they withdrew, in consequence of some dissatisfaction on the part of the board. I therefore made no inquiries into the details of their internal arrangements, cost of board, &c., (their permanent buildings being not yet even begun,) but proceeded, at once, to what I considered more within the scope of your inquiries, the principles of their treatment of the unhappy objects of their care.

I ascertained, with regard to discipline, that they *never permit the infliction of blows*, nor subject their patients to the strait jacket, which they consider extremely harassing ; and which, in one case at the Maryland Hospital, (if I remember aright,) nearly caused the death of a frantic sufferer, by strangulation ; the collar having, by his struggles, been drawn tightly across his wind pipe, in which condition he was found by the Sisters. Neither are they partial to the "mits," which they consider insecure, and therefore dangerous, both for patient and attendants. When they do employ them, they prefer linen ones, as less liable to stretch than leather. The Sister tells me, patients will

almost always contrive to slip their hands out of the mits, when alone, and replace them when they hear some one coming. Their most usual mode of restraining the violent is, with a sort of sleeve, invented by themselves, as I understood, and which is attached to a frock body, made to lace up behind, like a lady's corset. The sleeves are some inches longer than the arm, closed at the end, and drawn around the body and fastened behind. Festoons in front support the arms, as in slings, and prevent the distressing weariness that would otherwise be experienced. A coat, or female dress, according to circumstances, may be thrown over the whole, and conceal the fact of duress; a point at which they aim, if possible, as they find their patients excessively sensitive to the observation and opinions of others. The Sisters also, in suicidal or the like violent cases, sometimes resort to the "bed-gown," which the superior tells me needs no description, being in general use.

Having, in the rapid glance I cast over the Worcester report, observed that solitary confinement, under due precautionary restraints, had, at the Massachusetts Hospital, been found preferable to the irritation produced by perpetual surveillance, I directed my inquiries to that point, and learned that the experience of the Sisters was different; they find that the mind of the maniac, when deserted, preys upon itself. They therefore prefer, as far as their circumstances will permit, the restraint of their own presence and intercourse to actual bonds. You and I, my dear sir, have the happiness to know something of the supernatural motives which actuate the religious orders, can easily reconcile this discrepancy of opinion, by referring to the essential difference between that surveillance which is *hired*, from persons however conscientious, and that which is the voluntary offering of a heart devoted to the service of God, in the person of his afflicted creature. The one is, at best, the stiff vigilance of a sentry, galling his prisoner, like Lafayette, in the dungeon of Olmutz, to the frenzy of despair; the other, the tender watchfulness of a mother, which soothes the object of its care.

It is, further, the policy of the Sisters, of which they never lose sight, to elevate their patients in their own self-esteem. This is impaired, in proportion as they find themselves under duress. To this end, they treat them, as far as can be done with safety, as rational beings; they converse with them as such, and endeavor to conceal every symptom of distrust. Knowing that "sorrow uncommunicated" is a canker in the bud of life, they will occasionally lead them to converse upon the theme of their derangement, thus gradually gaining their confidence, and endeavoring to insinuate more rational ideas. They remark, too, that it is sometimes advantageous to permit two persons who labor under some deep, imaginary sorrow, to communicate freely with each other. Sympathy is thus excited, (the insane our Sister considers morbidly *selfish*,) and the sufferer learns, at the same time, that he is not miserable beyond all others. In the "pledges" so much spoken of in the Worcester report, the Sister places little confidence. She states that a lunatic derides the idea of a binding promise; especially if of the violent type. She thinks these unhappy persons are generally con-

scious of their own lamentable condition, and will ask you, when reminded of a broken pledge, "if you were fool enough to believe a crazy person." This consciousness seems to be a prominent difficulty in the moral treatment of this dreadful malady.

On the subject of occupation, the Sisters consider it of the utmost importance to supply the mind with employment. Light labor, suited to the circumstances of the patient, is recommended; and in cases of sullenness, which cannot be persuaded to take part in it, the Sisters employ, under the apparent or actual direction of a physician, some slight bodily annoyances, as a blister, cupping, mild cathartic, or the like, merely to engage the attention, and prevent the mind from preying on itself. They endeavor, also, to promote innocent amusements; music, draughts, chess, nine-pins, and the like. They have also "sewing parties," which are peculiarly acceptable to their patients, who at present are principally females; the extensive accommodations intended for both sexes being, as I have stated, not yet commenced. At these parties, the tables are supplied with materials, and the patients select and combine them pretty much ad libitum; the discourse being made as pleasant as possible, and refreshments of better quality than usual being provided. It is considered a great privation to be excluded from these parties, on account of any indecorum. But it is a point of discipline, that whenever any thing is prohibited, by way of censure, or for other cause, the *Sisters must anticipate* the wishes of the sufferers, by supplying some other gratification; so that they learn to confide in the sincere interest for their welfare, which pervades the whole system. It is not intended to have courts, or other uncouth and gloomy enclosures; an ornamental iron railing will secure their grounds. Books and newspapers are permitted freely. The patients (principally females, as above remarked,) ride out frequently, and accompany the Sisters on shopping or other excursions. They are fond, too, of attending at the offices of the church, and profess themselves soothed by the music and solemn ceremonials.

The diet, of course, is regulated by the special circumstances of each case, under the direction of a physician; but where no particularity is requisite, it is made wholesome and agreeable, and the patients are plentifully supplied, but not to satiety. The Sisters eat in the same apartment with them, one or two being appointed to each table. In cases where the invalid would be childishly gluttonous, she eats in a separate apartment, to avoid shocking the feelings of those who are convalescent, or whose habits have never fallen below the standard of propriety.

I have thus, my dear sir, endeavored to gratify your wishes, and my own, by supplying you with some hints, borrowed from the practice of this inestimable order of holy women. But, on looking over what I have written, I am mortified to find my account so meagre. This must be imputed, in part, to my want of practical familiarity with the subject, which has undoubtedly prevented me from pushing my inquiries into more minute details. Much, too, I hope, is to be ascribed to the peculiar character of this most dreadful malady that flesh is heir to. Every case, I presume, is more or less unique, and requires a peculiar

course of treatment ; and this, I am fain to believe, can be by none so sedulously and effectually supplied, as by women devoted, like the Sisters, to the spiritual and corporeal works of mercy ; combining the natural tenderness of the sex with the supernatural motive of divine love ; the softness of domestic affection with the firmness of the stranger. That their employment in public institutions is of the utmost utility to the latter, the experience of this city leaves no room to doubt. Whether it be desirable for the general interests of humanity, I much question. I rather incline to the opinion, that it is better for them to build up establishments of their own, where their benevolence will be unfettered but by the wise regulations of their institute—where their practical wisdom shall have free scope.

Your very obedient servant,

W. G. READ.

N. DEVEREUX, Esq.

VIII. CONNECTICUT.

(1.) *Extracts from a letter, dated November 11, 1841, addressed to the President of the Trustees of the New-York State Lunatic Asylum, by Dr. A. Brigham, Superintendent of the Retreat for the Insane at Hartford. Ct.*

"This Institution was established in 1817, upon the suggestion of the Medical Society of the State of Connecticut. About three thousand citizens subscribed and paid from 12½ cents to \$300 each, and so raised a fund of \$20,000, which was sufficient to purchase 17 acres of land with a house for the physician, (at \$2,720,) and to erect and furnish buildings to accommodate 50 patients and the steward and his family. Soon after the *State granted a lottery*, which yielded \$40,000. Of this sum \$10,000 were used to erect additional buildings for the accommodation of 40 more patients; the remaining \$30,000 are a permanent fund, of which the annual interest is appropriated to defray the annual expenses of the Institution."

"We hire 16 acres of land, which gives us about 33 acres in all; quite as much as we need, while so many of our patients are of a class which do not require out-door labor."

We have now 95 patients; 40 males, 55 females; which are 10 more than we can conveniently accommodate. The expenses per week for each patient averages \$3.50 to \$3.75.

"The salary of the superintendent is \$1600 a year, with house and garden; of the chaplain \$750; of the steward and matron (man and wife) \$600."

"For more than twenty years the subject of insanity has engaged much of my attention. Not many years ago I visited most of the celebrated hospitals for the insane in Europe; and since, those in the United States, and, I believe, I speak understandingly and without prejudice, when I say, I have seen none superior, and hardly any equal to those in New-England. That at Worcester is a worthy model for a State institution. My impression, however, as regards that, is that *the Trustees' visits are too unfrequent*. The present superintendent may not need any aid, in managing it, but others will. In no institutions are abuses so likely to arise, and to pass undetected, without extreme vigilance, as in a large institution for the insane. The trustees, whom the State have appointed to govern and manage it, and report its condition, should know from *personal inspection* all about its affairs. Their duties, I know, if properly performed, would be arduous; and they should be well paid. Your State is so large, and has so many charitable institutions, would it not be well for the same board of trustees to have a general supervision of all; visit all occasionally, and thus

be able to transfer improvements from one to the other, and make experience in one beneficial to all."

(2.) *Extracts from 17th Annual Report of the Directors of the "Reformatory for the Insane at Hartford, (Ct.) May 1, 1841.*

The importance of early attention to the insane should never be forgotten. Experience has demonstrated that insanity, if early and properly treated, is as readily cured as any other acute disease, while after it has continued for several years, or even for one year, the chance for recovery is greatly diminished.

"There are at present *sixteen* hospitals for the insane, in the United States. These accommodate about 1800 patients. But a majority of these patients belonged to the old and incurable class, before they were removed to hospitals, and it is a lamentable fact that even now the most applications for admission are for incurable patients, for those who have been deranged several years, many of whom would probably have recovered, had they been placed in a good asylum during the early stage of the disease. *It is the neglect of early and proper attention to the insane, that throws upon the community and afflicted friends, a large proportion of the protracted, and incurable cases which we find in our country.*"

DIET.

About one half of our patients take their meals with the steward, matron, and assistant physician. Our breakfast hour varies according to the season of the year, from half past six to eight o'clock; dinner at half past twelve o'clock, and tea at six o'clock. Generally, nothing occurs at meals that would be noticed by a stranger, more than at any boarding house. The table is genteelly arranged, and handsomely furnished, and in these respects as well as in the abundance and quality of the food, will favorably compare with the best boarding houses in this part of the country.

I regard the assembling of those who are in a good degree rational, and possess considerable self control, with the convalescent, and those that have recovered, at a common and well furnished table, with the officers of the household, as an important aid to us, in rendering a residence here agreeable and useful to our patients. As none are permitted at this table who conduct improperly, it induces many to exercise to the utmost their self control, in order to enjoy this privilege. It gives a family character to the establishment, and does away the impression that it is a place of confinement and separation from rational society, with none but the insane for associates.

We regard good and plentiful diet, generally essential for the comfort and cure of the insane, and therefore afford it to all those committed to our charge. Those who do not eat at the table of the steward, are supplied with food of the same quality at their rooms, or in the halls adjoining their rooms.

EXERCISE AND LABOR.

An elegant carriage is exclusively appropriated for the benefit of the patients. It goes out in pleasant weather, usually four times a day,

carrying six each time ; thus enabling all, both male and female, who are desirous or able to ride, to do so at least every other day. Other carriages are used by the patients for longer excursions, to make calls, &c.

In addition to this, the patients walk out daily, in companies of half a dozen or more, accompanied by an attendant, visit the city, the various institutions, or other objects of curiosity in the neighborhood. Many of them labor. No accurate account has ever been kept of the amount of labor performed here by the patients, but I am convinced that it is equal to that at other institutions with a like number of patients. We have at present between thirty and forty acres of land under cultivation, which will furnish vegetables for the family, oats and hay for our horses and cows, and yet we employ but one farmer. Those who visit the institution during the summer will see extensive gardens and grounds, yielding in beauty, good order, and productiveness to none in New-England ; yet so far as the hand of man is concerned, much of this has resulted from the cheerful and voluntary labor of our patients. We have also a joiner's shop, in which our patients labor and amuse themselves by making boxes or other articles. One has lately made a beautiful mahogany pulpit, for the accommodation of the chaplain of the institution. The female patients knit stockings and mittens, make shirts and sheets, quilts, &c., and assist in household duties. As evidence of the labor performed by our females, should be mentioned that our patients do the dress making and mending and sewing for the female department. We keep no sewing girl or dress maker.

AMUSEMENTS.—The exercise and labor alluded to, might with propriety be included under this head ; but in addition, the men play at ten-pins, a diversion that interests and animates even the melancholic and demented ; they also pitch quoits and play ball, during the warm season ; and in the winter, other amusements are resorted to. The females divert themselves in various ways ; once a week the matron has a party, to which a large proportion of the females are invited ; at these, in addition to some labor, they amuse themselves by various plays, telling stories in rotation, singing, &c. Also, once a week the ladies have a reading party, in one of the large rooms of the centre building ; here they have access to books, newspapers and periodicals, and the room is also supplied with various pictures, spy-glasses, and other things to interest them. They also play at battledoor, and some draw and paint, and others play on the piano forte. Occasionally we have had dancing parties. These have afforded much enjoyment to a considerable number, and to some, have, I think, proved beneficial.

RELIGIOUS SERVICES.

These have been continued during the past as in preceding years. Every evening the patients and attendants assemble, when a hymn is sung, and a portion of Scripture read, and prayer offered by the chaplain. On Sunday he preaches to the assembled household. On these occasions from *two thirds* to *three fourths* of our patients assemble, and several assist us in singing. Rarely is there any disturbance. I have frequently witnessed with pleasure and sur-

prise, those who were constantly in motion and noisy elsewhere, remain quiet and conduct with the utmost propriety during religious services.

I have no doubt these services are beneficial to our patients. Permission to attend them is solicited by nearly all, and many are induced to exercise their self-control, in order to enjoy this privilege.

The Sabbath is now looked forward to by our patients with pleasurable anticipations, but I apprehend it would be to them the most melancholy day of the week, and the one in which they would make the least improvement, were it not for our religious exercises.

The chaplain frequently visits and freely converses with the patients at their apartments. Good has resulted from this practice, conducted as it has been, with discretion and good judgment. Not unfrequently his timely and judicious remarks have given hope and encouragement to the melancholy and desponding, and essentially aided us in the moral treatment of our patients.

TABLE III.

Probable Causes of Insanity.

Hereditary,	204
Ill health,	112
Religious anxiety,	87
Intemperance,	81
Intense mental exertion,	81
Domestic troubles,	54
Loss of friends,	52
Puerperal,	39
Disappointed affection,	22
Masturbation,	20
Exposure and fatigue,	13
Epilepsy,	11

Probable causes of insanity.

Repelled cutaneous disease,	9
Disappointed ambition,	8
Injury to the head,	7
Disease of the brain,	6
Jealousy,	4
Malformation of the brain,	3
Change of habits,	4
Apoplexy,	2
Fright,	2
Bodily injury,	2
Exposure to fumes of charcoal,	1
Uncertain,	244

The following table exhibits the ratio of deaths in several of the most celebrated hospitals for the insane in Europe and the United States :

HOSPITALS.	Time.	No. of Patients.	Deaths.	Per cent.
Hanwell, England,	5 ys.	3,327	418	12.56
Wakefield, "	18 "	2,242	709	31.64
Lancaster, "	5 "	2,148	552	24.29
Retreat, York, "	40 "	508	113	22.22
Charenton, France,	7 "	2,049	546	26.64
Bicetre, "	10 "	1,405	685	48.75
Aversa, Italy,	20 "	3,897	1,222	31.35
Amsterdam, Holland,	5 "	255	55	21.56
Penn. Hospital, United States,	84 "	4,116	548	13.31
Frankford, Penn.	21 "	634	90	14.19
Bloomington, New-York,	20 "	2,496	222	8.85
Lunatic Hospital, Worcester, Mass. ...	7 "	1,196	90	7.50
Kentucky State, Lexington,	14 "	690	267	38.69
Ohio State, Columbus,	1 "	258	22	8.52
Vermont Asylum, Brattleborough,	3 "	239	11	4.60
Retreat, Hartford,	17 "	1,068	69	6.45

The number of deaths will vary in institutions equally well conducted. In those recently established, the deaths are generally few. During the first three years after the opening of the Retreat, there were but two deaths. As old and incurable cases accumulate, the annual number of deaths will increase.

The following table exhibits, for a series of years, the proportion of recoveries in the most celebrated hospitals for the insane, both in Europe and the United States :

HOSPITALS,	Time.	No. of Patients.	Recoveries.	Per cent.
Bethlehem, England,	14 ys.	2,445	1,124	45.56
St. Luke, "	50 "	6,458	2,811	43.52
Wakefield, "	17 "	2,242	991	44.20
Lancaster, "	15 "	1,750	697	39.82
Retreat, York, "	39 "	508	236	46.43
Cork, Ireland,	20 "	1,431	751	52.48
Salpêtrière, France,	12 "	3,007	1,625	54.04
Charenton, "	8 "	1,205	516	42.82
Aversa, Italy,	20 "	3,897	1,514	38.85
Penn. Hospital, United States,	84 "	4,116	1,349	32.77
Frankford, Penn.*	21 "	507	214	42.21
Bloomington, New-York,	20 "	2,496	1,145	45.88
McLean, Charlestown, Mass.	22 "	1,749	761	43.51
Massachusetts State, Worcester,	7 "	1,196	506	42.30
Vermont, Brattleborough,	3 "	239	89	37.23
Ohio, Columbus,	1 "	258	80	31.00
Retreat, Hartford, Ct.	17 "	1,068	600	56.17

I do not consider the above statistical tables as conclusive evidence that one institution is better conducted than another. Some are obliged to receive and to keep all the old and incurable cases that apply for admission, while others are at liberty to reject such. Some institutions are mainly designed for the safe keeping of the insane, and have but little medical attendance; while others are for their cure, and have one or more resident physicians. In all respects calculated to ensure the recovery of a large proportion, the Retreat has enjoyed good advantages.

The New-England institutions, and most of those in this country, are now conducted much in the same manner, and their success in curing cases that are similar will not probably vary but little. For several years past, about one-half of the whole number of patients admitted into these institutions have been cured, and from 80 to 90 per cent of those denominated recent.

* Dr. Brigham says, "much of the contents of these tables are taken from a late, interesting and learned work by Dr. Earle, Resident Physician of the Friends' Asylum, Frankford, near Philadelphia."

TERMS OF ADMISSION.

For patients belonging to this State, to be accommodated in the wings, and who do not require a separate attendant,.....	\$3 50	per week.
For those with similar accommodations, belonging to other States,.....	4 00	“
For those who require a room in the centre building and a separate attendant, if of this State,	10 00	“
For the same if from other States,	12 00	“
No patient to be admitted for a shorter term than three months, payment for that term to be made in advance.		
For the admission of patients apply to either of the managers.		

REPORT OF THE CHAPLAIN.

The usual religious exercises on the Sabbath and the evenings of the other days of the week, have been regularly continued during the past year. A large proportion of the patients have been in the habit of attending these exercises, and have evinced the benefit derived from them by the good order and becoming deportment which, with very few exceptions, have prevailed. The religious sensibilities are, in this way, often rekindled. Self-control is aided in regaining its dominion; and peace, at least for a season, visits the most agitated breast. May we not hope and pray that the spirit of grace and consolation will here, as well as elsewhere, shed down its hallowed influences to enlighten, to purify, and to bless the soul. Our Saviour, before he left the world, promised *the Comforter* to his disciples, and will he not delight to fulfil this promise among such as are kindred sufferers with those who shared so largely in his compassion while on earth. Among these sufferers we often find some of his most faithful followers.

Cases frequently occur which, in the opinion of the physician, require the services of the chaplain, in the way of personal intercourse with the patients; when the hope-inspiring views and promises of the gospel may be addressed to the desponding mind with great benefit. Such services have been promptly and cheerfully rendered.

Death sometimes enters the walls of the institution, and it has more than once happened, that the spirit, about to take its flight to another world, and in full possession of its reasoning powers, finds its faith and hope invigorated by the consolations which are administered and the prayers which are offered up, at this trying hour. It is a solace too, to the friends of the deceased, to know that the funeral solemnities are conducted with appropriate religious exercises. They have themselves often been present at these exercises.

There are other occasions, also, when feeble and convalescent patients express a wish to have the chaplain visit them, that they may enjoy the privilege of religious counsels, and of uniting in supplication at the throne of grace. With the advice and approbation of the physician, such visits are made, and evidently with very beneficial results.

In addition to this, it has been the custom of the chaplain to visit the patients throughout the institution, from time to time, to exchange

civilities and pleasant conversation with them, and to let them see that he takes a personal interest in their welfare. The respect and kindness with which they uniformly treat him, is no less grateful to his feelings than indicative of the advantages which such intercourse, wisely conducted, is capable of affording. The insane know well how to appreciate acts of sympathy, and among others those of a minister of the gospel.

The other inmates of the establishment, including the attendants and nurses, all of whom are usually present at the religious exercises, it is not to be forgotten, come in for their share of the benefits which these exercises afford. Every day, they hear truths and precepts from the word of God, which, if cherished and obeyed, will tend to make them more faithful in the discharge of duty; and they have the gospel preached to them, from Sabbath to Sabbath, which they would otherwise be but seldom permitted to hear, as their constant attendance on the patients is one essential feature of the management of the institution.

Commending it, with its various interests and concerns, to the guidance, protection and blessing of Almighty God, the chaplain can not conclude this report of his labors, without acknowledging the respectful kindness which has always been shown him, in the discharge of his official duties, by the physician, and all the other officers and inmates of the Retreat.

T. H. GALLAUDET.

May 12th, 1841.

IX. PENNSYLVANIA.

(1.) *Letter from Dr. Thomas A. Kirkbride, Superintendent of the Pennsylvania Hospital for the Insane, to Hon. D. Russell.*

PENNSYLVANIA HOSPITAL FOR THE INSANE, }
October 20th, 1851. }

Dear Sir:

Your letter of the 8th inst. reached me a few days since, and I take the earliest opportunity to reply to such parts of it as I am able to answer at the present time. This institution, as you are probably aware, was only opened for the admission of patients in January of the present year; and not having as yet published any report, or made any statistical tables, there are several matters referred to in your interrogatories which I am compelled to leave unanswered for the present, but of which I purpose speaking in detail, in my first report, and of which I shall take pleasure in forwarding a copy.

1. The Pennsylvania Hospital is a private charity dependent upon contributions. Legacies and donations for its support, in addition to the board received from pay patients. It consists of the hospital in the city, which receives medical, surgical and mania à potu patients, and of this hospital two miles from the city, into which none but the insane are admitted.

It is governed by a board of 12 managers, who admit patients and arrange the rate of board, &c. They also elect the officers of the house annually, and pay weekly official visits to inspect the house, and settle the accounts of the disbursing officers.

The officers resident in or near the hospitals, and who are paid by orders drawn by the board of managers, are, 1st. the physician; who has the general superintendence and direction of the establishment, the entire control of the patients and their attendants, and to whom all the other officers are responsible. He resides within the enclosure, supports his own family, and has a salary of \$3,000 per annum.

2d. An assistant physician; living in the hospital, representing the physician in his absence, compounding the medicine, and, under the direction of his superior, having the immediate charge of the patients. He receives \$300 per annum, his board, washing, &c.

3d. A steward; who attends to the financial business of the house, provides the necessary supplies, and sees that the grounds and buildings are kept in good order. He receives \$600 per annum, board, &c.

4th. A matron, attending to the domestic economy of the house, and receives \$300 per annum for her services.

The rules for the government of the attendants on the insane, and for all others about the house, should always be left to the individual to whom is entrusted the superintendence of an insane hospital, and on

that account I do not trouble you with those I have adopted in this institution.

We have 110 acres of land, 40 of which are enclosed by a stone wall 11 feet high, and intended for pleasure grounds for the patients ; 70 acres outside of the wall are cultivated by a farmer employed for the purpose. I believe this not to be more than is required for the purposes of the house. There can be no question about the immense advantage which is derived from labor by both the curable and the incurable insane.

We have at this time 110 patients under care ; of these 86 pay for their board, at rates varying from \$3.50 to 8 or 10 dollars per week, and twenty-four are supported on the funds of the house, the board of pay patients assisting to support the poor. In the hospital in the city are about 120 patients, 80 of whom do not pay board.

You will perceive from the above that this institution differs widely in its character from that you are about to organize. A board of commissioners, however, is at this time engaged in selecting a site for a State asylum for the insane poor of this Commonwealth, of whom (including idiots) there are about 1,000. Of these a very small part only are accommodated in any suitable institution. The Pennsylvania Hospital has 110 patients ; the Friend's Asylum about 60, (neither, however, confined to Pennsylvania,) and the remainder are either at home, or scattered in the different alms houses of the State.

I have to regret that I am unable at this time to give full answers to all your questions ; but as I have before said, I shall embrace the earliest opportunity to furnish you with full details of the history, organization and statistics of this hospital, and assure you that it will afford me pleasure at all times to give you the results of my experience in any matter connected with the cure or treatment of the insane.

Very respectfully,

THOMAS S. KIRKBRIDE.

To D. RUSSELL, Esq.

(2.) *Letter from the Superintendent of Friend's Asylum for the Insane, Frankford, near Philadelphia, Penn.*

Friend's Asylum, 10th month, 1841.

ESTEEMED FRIEND :

D. RUSSELL :—Thy letter of 30th ult. with certain interrogatories propounded by the trustees of the New York State Lunatic Asylum, has been received, and I avail myself of the first leisure that has since offered to make such replies as will meet the case, agreeable to my own judgment, and I hope, be satisfactory to the trustees.

1st. This institution was opened for the reception of patients on the first of 5th month, 1817. It was established by members of the Society of Friends. The cost of the buildings, first erected, was forty-six thousand dollars ; the money was raised among the members of the society. Its main dependence for support has always been the payment of board, &c. of the inmates ; when that source has failed to meet the current expenses, which has frequently happened, the deficiency has been raised from members of the society.

2d. It was originally designed exclusively for the accommodation of members and professors of the Society of Friends; and it was so restricted until the spring of 1834, when, by consent of the contributors, *others* than members or professors were received. The principal cause of this change was, there were not subjects enough of the description first named, to meet the expenses, or occupy the rooms provided.

3d. The buildings were originally designed for persons deprived of the use of their reason, and originally consisted of a centre building 60 feet square, four stories high, with two wings, each 100 feet long and 24 feet wide and two stories high, each containing 20 chambers about 10 feet square, for patients, with a gallery or passage 10 feet wide. The first floor of the centre building has four large rooms about 20 feet square, two of which are appropriated as day or sitting rooms for the patients, one for the accommodation of the superintendent's family, and the other as an office for the visiting managers to meet in. The second story consists of two large rooms, also employed as day rooms for the medical and convalescent patients, and four small rooms for the accommodation of the superintendent's family. There are four large and three small rooms in the third story; one occupied by the resident physician, one the apothecary shop, one is used as a parlor for the convalescent female patients, and the other lodging rooms for the female domestics. There are four large rooms in the fourth story, all occupied by the male domestics, farmer, gardener, watchman, &c. These buildings not affording sufficient room for a right *classification* of the patients, in the year 1828, two additional buildings, called lodges for the noisy patients, were erected at the end of the wings, each 20 feet by 22 feet, and three stories high. An apartment for washing clothes, and two furnaces for warming the apartments with heated air, is in the basement of the building, appropriated to the female patients. On the first floor are a bath room and three rooms for patients; on the second floor are four rooms, and on the third two rooms with an open entry 12 by 18 feet are for patients; one other room on this floor contains the reservoir for holding water to supply the bath room and wash houses. In the corresponding building for the men, at the east end, the basement is occupied with two furnaces for heating the apartments, and one room for a patient of the worst class, in addition to these on the basement of each of these buildings is a furnace and boiler for heating water for the respective bath rooms. Between the wings and these buildings in the rear, is an entry 5 feet wide, by which is the passage to the patient's yards, they being open to the air. When the doors of the wings and lodges are closed the noise in the lodges is not heard in the wings.

The buildings are all of stone, covered with slate. The lodges were erected at an expense of ten thousand dollars. In the basement of the centre building is a dining room for the domestics, &c., the kitchen and scullery, the ironing room, a room for winter vegetables, &c., and one other for various domestic purposes. The basements of the wings are divided by arches, serving as bake houses, store room, fuel, &c., and a furnace in each for warming the apartments with heated air. The entry of the basements, over 300 feet long, and 9 feet wide, is paved

[Senate, No. 20.] V

with brick. In the rear of the wings are situated the yards or airing grounds, for the male and female patients, separated by the space in the rear of the centre building, and each containing over half an acre, enclosed by a stone wall, 10 feet high. Towards the rear of these yards is a board fence, separating about one-third the ground, which is appropriated to the use of the old, confirmed, and idiotic patients. The yards are all planted with trees, and in grass, and in each is a *summer house*, with seats. Directly in the rear of the centre building, and between the walls enclosing the patients' yards, is the *flower garden*, tastefully laid out in gravel walks, and planted with shrubbery and flowers of various kinds; and adjoining this, is the *vegetable garden*, containing between two and three acres of ground, which affords ample supply of almost every variety of vegetables for the family. At the termination of a gravel walk, leading directly from the house through these two gardens, at the distance of about 300 feet, is an ornamental stone building, 20 by 30 feet, surrounded on all sides by a piazza, fitted up as a LIBRARY and READING ROOM, containing numerous specimens of natural history, maps, drawings, &c.: the ground at each end, and the rear, is planted with trees and shrubbery, making it altogether an agreeable-resort for such of the patients as are suitable to be there. Full two-thirds of the whole number of patients have the privilege at times. With all these facilities, *classification* is effected to as great an extent as is, perhaps, found in any other similar institution.

4th. There is at present in the house, 53 patients, 29 males, and 24 females. Since the opening of the house, in 1817, to the first of Third month, 1841, 750 patients have been received; 429 of that number have been received since Fourth month, 1832.

Recapitulation of 750 patients.

Discharged cured,	311
“ much improved,	85
“ improved,	76
“ without improvement,	119
Deaths,	95
“ by suicide,	6
Third month 1st, 1841, remaining in the house,	58
	750

Many of the cases of those discharged without improvement, were old, and some incurable, when brought to the house; others were imprudently removed by their friends, who would likely have been benefited, if suffered to have remained; and many of those “improved” and “much improved” recovered after leaving the house, as we think, from the effects of the treatment they were under while here.

5th. There are sixty-two acres of ground attached to the institution, which cost eight thousand three hundred dollars. There is one practical farmer steadily employed, with a man to assist him from spring until fall. Many of the patients also assist both the farmer and gardener. Of the sixty-two acres, only about thirty are cultivated: from

sixteen to eighteen acres are in woods ; the gardens, buildings, and grounds occupy the remainder. I think ten or fifteen acres, in addition, would be useful.

6th. There is a *circular railroad* of 500 feet in circumference, which affords exercise and amusement to both male and female patients, and is much used by them. No one thing we have ever, tried blending exercise with amusement, has proved so fascinating. There is a *carriage* kept for the patients' use, which, when the weather is suitable, goes out regularly twice a day. They also walk out every day, when the weather will admit. Through the woods is a serpentine walk of one mile, in which is placed seats at different sections ; and near the centre is a *summer house*, built on an isolated rock, giving a romantic appearance, and is a favorite resort ; at the northeast end of the wood, and near the house is a portion of the woods, enclosed with a high pale fence, in which are a number of *deer* ; and adjoining this is a *pretty grove* in which also there are goats. This is also a pleasant retreat in warm weather, to which the patients frequently resort—the men to read, and the females both to read and sew. The females, when in the house, amuse themselves with battledoor, the graces, drawing, reading, &c. ; the men with playing ball, quoits, checkers, &c.

7th. Knowing the salutary effects resulting from *labor*, we use all means to promote it ; and so very important in moral treatment do we think it, that two men are employed, whose business it is to keep the men patients out of the house, to work with them, and endeavor to keep the patients at work. The farm and garden, during the season, afford a fine field for operating, and a considerable number of the patients are kept steadily employed in the winter, in the *carpenter shop*, making boxes, &c., and also at making baskets ; a person who understands that business being employed during the winter, to instruct them. The water used for all purposes in the house is supplied from a spring near at hand, and conveyed through pipes to three reservoirs, situated in different parts of the building ; a forcing pump is the power used, and this affords another means of labor ; several patients, with a few of the attendants, are employed from one to two hours a day, six days in the week, at pumping water.

8th. There is a *standing committee* of five of the managers, who only are authorized to admit patients, and fix the rate of board, &c. Application is made to them, when a certificate from a physician, who has attended the family, or who resides in the neighborhood, certifying, of his own knowledge, that he, or she, is deprived of the use of their reason ; with a history of the case, as far as practicable, is to be offered to the committee, when the terms are agreed on, an order addressed to the superintendent to receive the patient is given. On no occasion can a patient be received, without an order from the committee.

9th. To this interrogatory I have no means to make a reply.

10th. From the current expenses of last year, I mean such only as I think should be charged for their support and accommodation, would average about \$4,50 per week for each patient. Previous to the year 1832 the average expense was under \$3 ; since that time the increased

facilities for their accommodation and restoration has so greatly increased the expenses as to make the difference between the two rates.

11. The officers and servants are, superintendent and wife, at \$1000 per annum; resident physician, \$800, and visiting or attending physician, \$600 per annum, who visit the institution twice a week. Three male attendants, who have the whole charge of the men patients, while in the house, and two others, who have the charge of them when out of the house, to keep them employed, &c., each at \$12 per month, with board, washing and mending. In addition to these, there are at all times some patients who have each a special attendant, at \$10 per month, with board, &c. A watchman, who goes through the house during the night; a coachman, who drives the carriage for the patients, each \$12 per month, board, &c. During the winter a basket maker is employed, at \$4 per week, with board only; a carpenter, at \$160 per annum, board, &c.; farmer, \$200 per annum, board, &c.; gardner, \$150 per annum, board, &c., and a man who makes fires, assists in the wash house, &c. &c. at \$12 per month, board, &c.

Among the females is a corresponding number of attendants; two who walk and ride with them, keep them employed when in the house, at sewing, knitting, or in any other way, and three others, who attend the patients, when in the house. Their wages varies from $\$1\frac{7}{10}$ to $\$2\frac{5}{10}$ per week; one seamstress, $\$1\frac{5}{10}$ per week; one woman, who has charge of the stores, and attends the table of the hired men and women, who are not attending on the patients and wash women, each \$2 per week; a baker, $\$2\frac{2}{10}$ per week; one cook and assistant, one dairy woman and assistant, and one waiter, who attends the family of the superintendent, their wages from $\$1\frac{2}{10}$ to $\$1\frac{7}{10}$ per week. In addition to these there was two women employed that have been overlooked: one who attends the table of the men patients in the lower wing, and assists in keeping the apartments of the patients in order, &c., at $\$1\frac{7}{10}$ per week, and one other, who keeps the resident physician's room and shop in order, and likewise the rooms of the hired men in the fourth story, &c., at $\$1\frac{5}{10}$ per week. The physicians are employed by the managers; their salaries are paid by the superintendent. The attendants on the patients and all others are employed by, and paid by the superintendent.

In addition to these, in reply to your interrogatories, I would further remark, that a proper classification is an important consideration in the treatment of patients deprived of the use of their reason; and employment or labor, should be promoted in every possibly way. My experience for near ten years has witnessed many remarkable instances of the happy results of steadily pursuing that part of moral treatment, and feel at a loss for words to express myself as I could wish, in recommending it to all who feel interested in the welfare of this unhappy portion of the human family; and in conclusion, that your laudable efforts to ameliorate their condition may receive the blessing of Him who rules the destiny of man, is the desire of

Very respectfully,

Your friend,

JN. C. REDMOND.

X. NEW-YORK.

(1.) *Letter from the resident physician of Bloomingdale Asylum, to the trustees of New-York State Lunatic Asylum.*

Bloomingdale Asylum, Nov. 15, 1841.

GENTLEMEN :

In reply to certain queries, respecting this institution, I would state that the governors of the New-York Hospital were in the habit of occasionally admitting insane patients into that institution, from an early period of its existence.

The inconvenience arising from having them in the same building with the sick, and the increase of their number, induced them to erect, in 1808, a building expressly for the accommodation of this class of patients. This I believe was the first building erected in the United States, for the reception and treatment of the insane. It continued to be used for that purpose until the completion of the present Bloomingdale Asylum in June, 1821. In 1818, the same board of governors, actuated by a desire of accommodating the still increasing number of applicants, of removing them from the noise and excitement inseparable from their location, in the midst of the city, and of introducing those principles of treatment, which had wrought such an amelioration in the condition of the insane, in some institutions of Europe, were induced to purchase the present admirable location of this institution, and commenced the erection of the principal building. The authority by which it was established, you thus perceive, was derived from the charter of the New-York Hospital; of which it forms the insane department. In the erection of this building, and the purchase of the grounds attached, a debt of about two hundred thousand dollars was incurred, for the payment of the interest of the debt, and the establishment of a sinking fund for its final liquidation, an annuity of ten thousand dollars from the State is appropriated.

This is its only endowment, and to defray its ordinary expenses, it is entirely dependent upon its receipts for the board of patients; it is of course, not designed for the gratuitous support of any patients.

The establishment consists of three buildings; of these the principal is built of stone, is 211 feet in length, by 60 in depth, and contains, besides offices and department for the offices, kitchens and store rooms, seven sitting, or day rooms, and 68 dormitories for the patients. The edifice is of three stories above the basement, and is divided into a centre building and two wings. The wings are arranged in each story with a large hall through the whole length, and the dormitories, and sitting rooms, on either side. The dormitories are about 12 feet by 10 feet, and $13\frac{2}{3}$ feet in height, with ventilating tubes connecting with a

main pipe carried up above the roof. The sitting rooms are 25 feet by 18 feet, the other two buildings are erected at a distance of 117 feet to the north, and on a line with the ends of the principal building, one of them is 57 feet by 32 feet, the other 68 feet by 40 feet. They are three stories in height, built of brick, and contain 59 rooms for the patients. They are arranged similar to the wings of the main building, with halls, and dormitories and sitting rooms, on either side. The sitting rooms are 21 feet by 15 feet and 10 feet in height. The dormitories are 10 by $6\frac{1}{2}$ feet. The lower story of one building is occupied as a laundry. The buildings are generally well adapted to the purpose for which they were designed, quite as much so as those of any institution I have visited. If the dormitories were more numerous, so as to accommodate each patient with a separate room, the arrangement would be improved, and an additional building for the occupation solely of noisy patients would be of great advantage, and much improve our means of classification.

At the present time we have in the asylum 82 males and 55 females; total 137. As to other particulars contained in your fourth query I beg leave to refer to our last report herewith sent, in which will be found tables containing the information required except in reference to suicides, the number of which I have not means of ascertaining. I am happy to be enabled to state that none have occurred in the institution for nearly four years.

About 50 acres of land are attached to the asylum, twenty six of which were purchased at an expense of \$500 per acre, the remainder at various prices.

It is cultivated by the farmer and his men, under the direction of the warden; such of the patients as can be induced to labor, are also occasionally employed under the care of the farmer. A considerable portion of the land is devoted to the use of the patients, in yards, walks and pleasure grounds; the rest is cultivated for the production of vegetables for the use of the establishment; some grain and hay, and also pasture for the cows, which supply the milk used in the asylum. The land is about adequate to the supply required. The inmates amuse themselves at ten-pins, draughts, chess, dominos, cards, bagatelle, &c. Music affords occupation and amusement to some, and through the winter we have occasional balls; our library and reading room are constantly used. The effect of all these, or indeed of any occupation, is of the greatest benefit to all who can be interested in them, and of incalculable value to the convalescent. Without recourse to labor or amusement, I entertain no doubt that the unavoidable excitement and confusion of an insane asylum would be much increased, and the recovery of many, if not prevented, at least, retarded.

Patients are admitted upon the written order of one of the committee of the asylum, and the lunacy warrant from any two magistrates, as required by the Revised Statutes, or upon the order of the superintendent of the poor of any county or town.

The expense per week, including medical attendance, board, &c. is \$4.50 for each patient. The persons employed in the asylum are,

the physician, at a salary of \$1,500; a warden, at a salary of \$1,000; a matron, \$250; a chaplain, \$150; a farmer and six assistants—the principal, who also acts as assistant steward, at a salary of \$400, his men at about \$12 per month.

We have engaged in attendance on the patients, 11 males, at from \$12 to \$20 per month; and 8 females, at \$8 per month. In the kitchens and other work about the house, two males, at \$14 and \$12, and four females, at from \$7 to \$10, a chambermaid at \$7, a waiter at \$14 per month.

In reference to the system of government of such an institution, I think the general system adopted in the several institutions of a similar character in the eastern States, and also in this, (modified in some particulars, which would readily present themselves to your board, in order to meet any particular features of an institution of the magnitude, and of the probable varied character of the inmates of the one under your particular charge,) would be well adapted.

A physician in chief, with at least two assistants, together with other usual officers, whose particular duties should be clearly defined, I should think of great importance to the proper arrangement and management of the institution.

As regards the admission of patients so as to insure an equal distribution of the benefits of the asylum throughout the State, it is more difficult to point out the course to be pursued, supposing the general expenses of the institution to be defrayed by the State, each county might be allowed to send a number proportioned to its respective population and the capacity of the asylum. For any number beyond its quota received at the asylum, a price equivalent to the actual average expense should be paid by the county.

If all are expected to pay, fix a minimum price at which paupers shall be received and allow each county to send a number proportioned to its respective population, provided the institution has not accommodation for all applicants. This plan also presumes that any deficiency in the amount necessary to support the institution, shall be paid by the State.

Any information at any time in the power of myself or the warden, will be communicated with pleasure.

With great respect, yours, &c.

WM. WILSON, M. D.

Resident Physician.

To D. RUSSELL, Esq.

*President of Board of Trustees of
State Lunatic Asylum.*

(2.) *Extracts from the Report of the Resident Physician of the Bloomingdale Asylum, January 1, 1841.*

Almost twenty years having elapsed since the opening of this building for the reception of patients, I have thought that it might not be uninteresting to bring to your notice not only the results of the past year, but of the whole period. When first established there was no institu-

tion of a kindred character in the country—it was, in fact, the pioneer in this country, in that course of improvement which has resulted in such a change in the construction and management of insane asylums, that to provide for the mere protection and security of their inmates is far from being, at the present time, the principal object in their arrangements. That institution which should fail to provide, not only for their protection, but their comfort, relief and recovery, would be considered as entirely deficient in all those means which are calculated to render it, in truth, an asylum for this afflicted class of our fellow creatures. To science and philanthropy combined, are we indebted for this amelioration in their condition—a change so great as to form a prominent feature in the history of philanthropic institutions of the present day. But, notwithstanding the success which has attended this union, the extent of its influence is comparatively little known to, or appreciated by, the public in general; few, except those who, by some afflictive dispensation in their own families, or among the circles of their acquaintance, have been obliged to investigate the subject, are aware of the slight restraint and comparative comfort of those who are inmates of asylums for the insane. It is indeed both gratifying and astonishing to those of us who are necessarily in constant attendance upon them, to hear the exclamations of delighted surprise, with which almost every visiter of our institution witnesses their every day condition. The observance of the order and regularity they preserve—the interest they manifest in their different amusements—their quiet and correct behaviour at meals—the freedom with which they engage in conversation with the stranger, and the general absence of all personal restraint, are a constant source of gratification, and not unfrequently prompt the inquiry, whether these are the insane, and whether we have none that are violent and raving? The systematic order which, of necessity, must be observed in such an institution, undoubtedly contributes in a great degree to this result—for we are all such creatures of habit that even the insane yield readily to its influence. By the remarks here made, we do not wish to convey the impression that no restraint is used; on the contrary, the occasional violence of some renders a resort to it necessary for their own safety, and that of other patients, and attendants; to obviate its use as far as possible, is, however, our constant object and aim.

Our first endeavor is to classify our patients, and assign each to his proper attendant. This attendant is to see that those entrusted to his care yield a ready compliance with all the ordinary regulations of the house, and the particular directions of the physician. The attendants are responsible for the personal cleanliness and comfort of their particular patients, as well as for the order and cleanliness of their particular apartments. At the present time we have engaged in attendance on the patients, eleven males and nine females, who, in addition to the duties before specified, are expected to interest their patients in the different amusements provided for their relief—accompanying them in walking about the grounds, or in the neighborhood, and take charge of them when they ride out—provide against

escape or accident, and also engage them in such occupations as may be deemed expedient.

The usual routine of our domestic arrangements is, in most particulars, that of an ordinary family. All who are in good health rise and breakfast at 7 o'clock, dine at 1 o'clock, and sup at 6 o'clock. They are, in the intervals between meals, generally employed in reading, walking, riding, or other amusement and occupation. After supper they are at liberty to retire to their rooms, or spend the evening, until 10 o'clock, in the halls or sitting rooms, in such a manner as may be most congenial to their own feelings, provided it does not interrupt the repose of those who have already retired.

The library, consisting of a large number of well selected works, the principal periodicals, with several daily papers, is a source of great amusement and relief to a large number of inmates, and forms an important feature in our system of moral treatment, which, I trust, will continue to receive your attention and encouragement.

The observance of public worship on the Sabbath, is also a source of great gratification. From sixty to seventy usually attend, and their participation in the services, and orderly behaviour, is such as to excite the surprise of all who witness it. Public worship has, for a number of years, been introduced into this asylum, and both in my opinion, and that of my respected predecessors, has been, independent of its more lasting and higher influences, eminently conducive to the promotion of order, self control, and relief from the ennui and monotony almost inseparable from their life of seclusion. The series of tables herewith presented, bring before you the results consequent upon the system of management and medical practice here adopted, and embodying also the principal facts in the history of the cases under the care of the institution during the past year, furnish data of an important character to those who feel an interest in the subject of insanity or its treatment.

TABLE I.

State of the ASYLUM from January 1st, 1840, to January 1st, 1841.

Patients admitted,.....	{ Males, 71 Females, 42	113
Cases of less duration than one year,.....	{ Males, 45 Females, 25	70
Cases of longer duration than one year,.....	{ Males, 26 Females, 17	43
In the asylum, Jan'y 1st, 1840,.....	{ Males, 74 Females, 52	126
In the asylum in the course of the year,.....	{ Males, 145 Females, 94	239

Cases now in the asylum of less duration than one year,	{ Males, 14 Females, 9	23
Cases now in the asylum of longer duration than one year,	{ Males, 67 Females, 41	108
Remaining at the end of the year,	{ Males, 81 Females, 50	131

TABLE II.

Discharges and deaths in the year 1840.

		Males.	Females	Total.
Recovered,	{ Recent cases,	29	17	46
	{ Old cases,	10	4	14
				60
Improved	{ Recent cases,	4	4	8
	{ Old cases,	9	8	17
				25
Request	{ Recent cases,	1	0	1
	{ Old cases,	3	4	7
				8
Died,	{ Recent cases,	4	3	7
	{ Old cases,	3	4	7
				14
Eloped	{ Recent cases,	0	0	0
	{ Old cases,	1	0	1
				1
		64	44	108

TABLE IV.

Duration of Insanity of Patients in the Asylum during the year 1840.

Less than 1 year,	85
From 1 to 2 years,	70
" 5 " 10 "	40
" 10 " 15 "	14
" 15 " 20 "	8
" 20 " 25 "	10
" 25 " 30 "	4
30 and upwards,	8
	239

TABLE V.

Civil state of Patients in the Asylum, in 1840.

Single,	{ Males,	80	
	{ Females,	34	
			114
Married,	{ Males,	55	
	{ Females,	49	
			104
Widowers,	.....	10	
Widows,	.....	11	
			21
Total,	.....		239

TABLE VII.

Occupation of Patients in the Asylum during the year 1840.

Merchants,	28
Clerks,	13
Farmers,	30
Farmers' wives and daughters,	12
Seamen,	10
Tailors,	4
Watchmakers,	2
Cabinet makers,	3
Saddler,	1
Currier,	1
Carpenters,	5
Shoemakers,	6
Blacksmiths,	2
Butchers,	3
Painter,	1
Gilder,	1
Inn keepers,	2
Lawyers,	7
Physicians,	4
Clergymen,	2
Students,	4
Teachers,	3
Officer in the army,	1
Engineer,	1
Sculptor,	1
Pedler,	1
Cloth dresser,	1
Fisherman,	1
Carman,	1
Contractor,	1
Drover,	1
Dressmakers and seamstresses,	8
Servants,	10
No occupation, chiefly females,	68
Total,	239

TABLE XII.

Recoveries of old and recent cases, from 1823 to 1840.

Year.	Old ad- mitted.	Old re- covered	Recent admit'd	Recent recov'd.	Year.	Old ad- mitted.	Old re- covered	Recent admit'd	Recent re- covered.
forw'd	-----	-----	-----	-----	-----	484	30	710	507
1823	58	8	73	47	1832	44	1	74	43
1824	70	4	51	44	1833	79	2	59	56
1825	67	1	89	70	1834	59	10	43	41
1826	49	0	93	56	1835	83	6	55	52
1827	42	2	92	65	1836	64	10	57	56
1828	42	4	92	55	1837	47	11	65	39
1829	28	3	63	46	1838	54	11	68	62
1830	61	0	73	56	1839	49	16	64	52
1831	67	8	84	68	1840	43	14	70	46
forw'd	484	30	710	507		1006	111	1265	974

TABLE XIII.

Yearly admissions of recoveries, with the per centage of recoveries from 1821 to 1840, inclusive.

Year	Admissions.			Recoveries.			Per centage of recoveries.		
	Males.	Femal's	Total.	Males.	Femal's	Total.	Males.	Femal's	Total.
1821	75	48	123	16	3	19	$21\frac{1}{3}$	$6\frac{1}{4}$	$15\frac{1}{4}$
1822	66	36	102	38	10	48	$57\frac{7}{8}$	$27\frac{7}{9}$	$47\frac{1}{7}$
1823	83	48	131	35	20	55	$42\frac{1}{6}$	$41\frac{1}{3}$	42
1824	77	44	121	41	7	48	$53\frac{1}{4}$	$15\frac{1}{11}$	$39\frac{2}{3}$
1825	102	54	156	57	14	71	$55\frac{9}{10}$	$25\frac{2}{27}$	$45\frac{1}{2}$
1826	97	45	142	50	19	69	$51\frac{9}{10}$	$42\frac{2}{9}$	$48\frac{4}{7}$
1827	107	27	134	53	14	67	$49\frac{1}{2}$	$51\frac{2}{3}$	50
1828	86	48	134	39	20	59	$45\frac{1}{3}$	$41\frac{2}{3}$	44
1829	66	25	91	34	15	49	$51\frac{1}{2}$	60	$53\frac{1}{3}$
1830	97	37	134	45	11	56	$46\frac{2}{3}$	$29\frac{3}{4}$	$41\frac{3}{4}$
1831	102	49	151	58	18	76	$56\frac{5}{6}$	$36\frac{5}{4}$	$50\frac{1}{3}$
1832	82	36	118	28	16	44	$34\frac{1}{7}$	$44\frac{4}{9}$	$37\frac{3}{10}$
1833	89	49	133	38	20	58	$42\frac{7}{10}$	$40\frac{1}{12}$	42
1834	67	35	102	38	13	51	$56\frac{9}{11}$	$37\frac{7}{11}$	50
1835	75	63	138	35	23	58	$46\frac{2}{3}$	$36\frac{1}{3}$	42
1836	73	48	121	38	28	66	$52\frac{1}{8}$	$58\frac{1}{3}$	$54\frac{1}{10}$
1837	72	40	112	35	15	50	$48\frac{2}{3}$	$37\frac{1}{2}$	$44\frac{9}{4}$
1838	79	43	122	48	25	73	$60\frac{3}{4}$	$58\frac{1}{7}$	$59\frac{5}{6}$
1839	69	44	113	50	18	68	$72\frac{1}{2}$	$40\frac{0}{11}$	$60\frac{2}{11}$
1840	71	42	113	39	21	60	$54\frac{1}{2}$	50	$53\frac{1}{10}$
1635	861	2496	815	330	1145				

SUMMARY OF THE ABOVE.

	Admissions.	Recoveries.	Per centage of recoveries.
Males,	1635	815	$49\frac{6}{7}$
Females,	861	330	$38\frac{1}{3}$
	2496	1145	$45\frac{7}{8}$

(3.) *Letter from James Macdonald, M. D. of the city of New York, proposing plan for organizing New-York State Lunatic Asylum.*

To the Hon. DAVID RUSSELL,

President of the trustees of the New York State Lunatic Asylum.

SIR—In compliance with your request, that I would draw up a plan for the organization of the State Lunatic Asylum now being erected at Utica, I will endeavor to redeem my promise in as comprehensive and practical a manner as my time and want of information as to the internal arrangements of the buildings will allow. In undertaking this task I am fully sensible of its importance, (second only perhaps to that of planning the material part of the establishment itself,) and feel as if our State, in carrying out this great experiment of a truly colossal hospital for the insane, would either be disgraced by failure, or by success would add immensely to her renown.

It would have been better, perhaps, that the same mind which designed the buildings, had also given a plan for the organization and management of the institution; that the same spirit which conceived and formed the machine, had put it into motion, had adapted its different parts to their various functions, and had combined them all into one harmonious whole.

In considering a plan for organization, I will in the first place proceed upon the supposition that buildings for one thousand insane patients are completed; and that all parts of these structures, including methods of ventilating, warming, &c. are ready for occupation. The *material part* of the establishment then having been disposed of, I will at once proceed to what may be termed its *personal department*. This includes all the officers, nurses, servants, and patients; the selection appropriation and operations of the former of whom, with the grouping, lodging, feeding, treating, employing, &c. of the latter will form the organization and management of the institution.

1. In the first place then, the general government of the institution will be vested in a board of five trustees, appointed by a law of the State.

2. As the supreme object of the institution, to which every thing in its construction and government directly or indirectly tends, is the improvement and recovery of the insane; I propose that the *physician in chief*, who may also have the title of DIRECTOR, shall be its first officer, the *head*, in name and in fact of the whole establishment, so that

all other officers, under the board of the trustees, shall be subordinate. The physician and director should be the main spring of the whole machine, the master spirit of the entire institution. As he is to exercise such high functions and to originate and direct the treatment, medicinal, moral, physical, and dietetic of a thousand insane minds, he should be held responsible for the results, at the same time that he should be invested with sufficient authority for the execution of his plans. He should have power to hire or dismiss all subordinate persons in the employ of the institution; and all superior officers should be so far under his control as to receive instructions from him.

The adoption of this part of the plan will prevent a division of interests, and keep one part of the household from arraying itself against the other, and if properly used will make every thing tend to one point, the comfort and restoration of the insane. If it confer upon one individual increased authority, it imposes additional obligations. His direct responsibility for the welfare of the institution and the conduct of its other officers must check any abuse of power.

I would not say more on this subject, if it had not been the practice in some asylums to place the physician on a footing with and even subordinate to other officers. Happily however this anomaly is vanishing before the progress of sound principles, but to sustain the position here laid down, I beg leave to quote the highest authorities of Europe. **PINEL** one of the most illustrious names of France, in medicine and philanthropy, says, "Whatever may be the principles on which an asylum is conducted, whatever modification it may receive from time, locality, and different forms of government, the physician by the nature of his studies, the extent of his knowledge and the strong interest which he has in the success of treatment must be so well informed as to be the natural judge of every thing that passes in a hospital for the insane." **JACOBI**, the experienced and distinguished physician of the large asylum at Sieburg, in Germany, says, "As every operation in this department, also (that of steward) must concur with the rest in promoting the ultimate object of the establishment, and as the most perfect unity of purpose and unimpeded activity must every where characterize all the exertions made to this end, so it is here again evident that the supreme direction and control of all the officers and servants without exception employed in this department, must likewise be concentrated in the directing physician." **ESQUIROL**, the highest authority of the age in which he lived, says, "The physician should in some manner be the vital principle of an insane asylum; it is by him that every thing must be put in motion; called as he is to be the regulator of all thoughts, he directs all actions. Every thing which interests the inmates of the establishment points to him as the centre of action. The physician should be invested with an authority from which no person can escape."

Such then being the high responsibilities of the physician to a lunatic asylum, he should be carefully relieved from every duty calculated to direct his mind from its legitimate objects of pursuit. He should not be burdened by any financial responsibilities; should have no concern in the purchase of supplies, except to indicate such as may be requi-

site ; should not for a moment be wearied with their distribution, and in fine, should not have his attention diverted by any thing from the high duties of his office. To supervise in the most cursory manner the material part of the establishment, to devise methods for the comfort and improvement of a thousand human beings deprived of the ability to take care of themselves, to observe minutely and treat medicinally such of the number as may be proper subjects for medical treatment, to adapt occupation, amusement and moral discipline to all, will require on the part of the physician and director the greatest industry and system. But the duties of the physician to a lunatic asylum do not end with the performance of his daily visits ; he has also professional duties to discharge. Placed in an extended field of observation, he can collect facts which may be of immense service to his medical brethren. In the performance of these varied and important functions, it is evident that he must have the aid of efficient medical assistants. In the first place, he should be seconded by an officer to be called **ADJUNCT PHYSICIAN**. As the name implies, this officer should be of sufficient standing in his profession to aid his chief in performing the highest duties of his station, to assist in the general treatment, medical and moral, of the whole establishment, to see that all the details of treatment prescribed by the director are carried into effect, to guard against abuses of every kind, and to take the place of physician in chief whenever the latter may be absent or sick. While the adjunct should identify himself as much as possible with the principal physician, he must under all circumstances consider himself subordinate. When we consider the large number of patients in the State asylum, and that the object in assembling them together is not their mere safe keeping, but their amelioration and recovery, the propriety of appointing an officer of this grade will be evident.

Besides these two physicians, there should be for every two hundred patients one junior assistant, whose duty it will be to carry into effect in the particular division in which he is stationed, the treatment ordered by the director. These assistant physicians will perform all the minor operations, such as bleeding, cupping, dressing blisters, setons, issues, &c. and applying bandages, accompany the physician in his visits, write down his observations and prescriptions, and under his directions keep as minute a record of cases as the latter may deem necessary. The assistants may be either advanced students or young graduates in medicine ; and after their term of service has expired, they cannot fail to carry with them from the hospital a fund of knowledge which neither education nor experience can procure elsewhere.

3. **APOTHECARY**.—To prepare and distribute medicines, it will be necessary to have an apothecary and assistant or apprentice.

4. As more directly connected with the curative treatment of patients, the **CHAPLAIN** may be next named. As it will be his duty not only to perform the usual services of the chapel, where such patients as in the opinion of the director may be in a proper state of mind, are assembled together, but to visit them individually ; to become their ever ready friend and counsellor, and to offer them the precepts and

consolations of the gospel; he will become a most important aid to the physician in the moral and even in the physical branch of his service. The importance morally, curatively and religiously, of securing the services of a clergyman of rare intelligence and elevated piety, to watch over an institution containing a thousand patients, besides numerous officers, attendants and servants, is so evident, that it seems unnecessary to bring forward any facts or authorities in support of it. It may be added, that chaplains are now attached to all the best conducted lunatic asylums in Europe and America.

5. The purchase and distribution of supplies may be termed the *economical department*. These various functions should be performed by two distinct officers, viz: the WARDEN and STEWARD.

(1.) The WARDEN, who should have charge of and be responsible for the material part of the establishment, shall keep every thing in repair, purchase supplies, superintend the garden, farm and workshops, pay and receive moneys, keep accounts, &c. &c. Persons more immediately under him; clerk, farmer, gardener, laborers, (sane and insane,) hostlers, baker, gate-keepers, watchmen, engineer, and various mechanics.

(2.) The STEWARD, whose duties, in contradistinction to those of the warden, should embrace in detail the services of the interior of the establishment; receiving all supplies, whether of food or clothes, from the warden, distributing them, clothing the patients and victualing the whole family. Persons more particularly under him: the cook, tailor, shoemaker, nurses and attendants.

6. THE MATRON.—The duties of matron, if well performed, are second in importance only to those of the director. To appreciate her services, let us imagine a private family, consisting chiefly of young and helpless children, without the care and kindness and sympathies of woman. In the matron of a lunatic asylum should be found the highest qualities of the heart, directed by an intelligent and cultivated mind, and animated by that devotion and singleness of purpose which Christianity alone can inspire. Her presence and spirit should be felt in every part of the establishment, more particularly in that division of it appropriated to her own sex, where the ceaseless activity of a superior understanding and a benevolent heart, will find ample scope. She will aid in carrying into effect the treatment ordered by the physician, direct the varied employments of the females, and administer to the unfortunate and afflicted in a thousand little things which no one else can suggest. But her duties should not be entirely limited to sex; her spirit should in some degree pervade every portion of the institution. England is the only country within our knowledge, where females of cultivated minds and enlightened benevolence, are seen to exercise in institutions of this kind, a controlling influence. And why should not the attention of this sex, to which the world is so much indebted for the propagation of various schemes of benevolence in distant lands, be directed to charities at home? Men may construct proper buildings for the insane, investigate their diseases philosophically, and apply to them the rules of art and the lessons of experience; but it is the more peculiar province and power of woman to enter into the feelings of the

unfortunate, and to console the afflicted; and her sympathy and kindness are frequently more efficacious in "ministering to a mind diseased," than the science of the physician or the drugs of the *materia medica*.

For the thorough execution of her varied duties, the matron should have an assistant, to be called the assistant matron or housekeeper.

7. **OVERSEERS.**—In addition to the principal officers already named, each building or division of the establishment, should be under the supervision of an overseer, whose duty it will be to watch over his or her particular portion of the premises, to superintend the nurses and attendants in the performance of their various offices, to see that they rise and retire in proper season, are faithful and kind and commit no abuses, to watch over the interests of the patients, their treatment, employments, amusements, &c.

8. **ATTENDANTS AND NURSES.**—The selection of nurses and attendants of the right character, will be one of the most difficult and important of all the functions that the director will be called on to perform; for on their humanity, trustworthiness and skill, depend the proper application and result of all his rules of practice. Vain will be all his theories and prescriptions without these qualities in his assistants. As the physician is to be responsible for all treatment, it is evident that the choice of such means or instruments for effecting it, should be as entirely left to himself as that of medicine. He should then have the power to hire and dismiss them at a certain rate of wages fixed by the trustees. The proportion of nurses or attendants to patients is a most important subject of consideration. Of course, nothing like the same ratio can be preserved as in private establishments, where patients or their friends are able to make ample remuneration; but if an efficient course of treatment and management be contemplated in the State Asylum, it will be necessary to have at least one to every fifteen or twenty patients. In choosing these functionaries, reference must be had to the employment of patients; hence it will be necessary to select a certain number having a knowledge of those trades which may be most usefully introduced into the asylum.

9. As a large farm is attached to the institution, it is taken for granted that the business of farming and gardening will be conducted on an extensive scale; and that, not for the purpose of enriching the coffers of the State, for such an attempt would be equally petty and chimerical, nor yet to raise produce by hired labor for the consumption of the hospital, for that would cost much more than the same could be purchased for in market; but to give agreeable and useful occupation to the patients, and at the same time to yield as large a return to the establishment as may be practicable and useful. To carry out these views, both the farmer and gardener should be employed with the express understanding, that *all their labor* must come from the patients, aided and stimulated by the spirit and example of their ordinary attendants. That species of agriculture which requires the greatest number of hands to carry it on, should be introduced; or rather, the whole farm through the large amount of laborers that might be brought to work on it, would soon be converted into a garden; and horticulture,

which requires so much labor, be made to supersede agriculture. In deed, I know of no good reason why the sweat of the patient's brow, while it relieves his troubled brain, may not only contribute a considerable portion of his sustenance, but send vegetables, fruits and flowers to the neighboring market.

10. Suitable rooms or buildings should be appropriated for workshops for carpenters, cabinet-makers, shoe-makers, and saddlers, tailors and seamstresses, weavers, basket-makers, &c. &c.

So much for an outline of the personal department; which should be so filled up by the trustees as to define minutely the functions of every member constituting it, and to leave no chance for any officer either to mistake or neglect his duties. Now for the working of the plan.

That this may be done effectually, several pre-requisites are necessary. Among these may be mentioned as of more especial moment, 1st, system and discipline; 2d, occupation.

1. **SYSTEM and DISCIPLINE.** It is scarcely possible to conceive any combination of circumstances, that would render system and discipline more necessary than the management of a thousand lunatics assembled together in the same establishment, or it may be said, under the same roof. Without system every thing would be in a state of chaos—with a well-digested and vigorously conducted system, almost as much order might be established as among any other body of men assembled for any purpose whatever. The first essential in the promotion of system will be **CLASSIFICATION**. The moral treatment of the insane, which in general terms is so comprehensive, and includes the various kinds of employment and recreation, the personal influence of the physician and other officers, and in a word every agent brought to bear directly on the mind of the patient, begins with classification. Without it, the whole management of an establishment for the insane becomes confused and irregular. When well established, it gives a tone and system to every thing else. Indeed some classification or other should be fixed upon before adopting any plan for building, and the internal arrangements made accordingly. Though until recently it has been scarcely thought of in the construction of asylums, yet provision for classification is now justly considered by almost all persons of experience as of the first importance in the treatment of insanity. By the indiscriminate mingling of the mild and furious, of the clean and filthy, of the convalescent and idiotic, there will be perhaps a more heterogeneous assembly than any other kind of society of equal numbers can present, and need only be witnessed to be deprecated. But by classification, I would not be understood as wishing to group the insane according to the nosological arrangement of *books*, nor yet strictly according to curableness or incurableness, but agreeably to their habits of order, personal neatness, and sociability, their general behaviour and capacity for enjoyment in each others society. The number in each class should be limited. In this as in many other matters, it will be well to imitate as nearly as possible the previous habits of life. Let each class be a separate family in numbers and it will become a family in habits. In a large class of patients as in a large family, there will be more confusion and less domestic comfort, than in a smaller one. "There is hardly any matter

connected with the management of the insane, which appears to be more clear than the desirableness of dividing the patients into small classes. They are less liable to annoyance from one another; they are more apt to engage in some rational pursuit; and they are more likely to be the subjects of discriminating observation by the attendants and officers. The distressing impression made upon the mind of a susceptible insane person, on being turned into a company of fifty people of the same class, can be more easily imagined than described; there are many it is true who have not this susceptibility; but for these the large associations have no advantages; on the contrary, they are far more likely to be diverted from their absorbing musings, with a moderate number of companions, than in a confused crowd. Under the old system, fifty, sixty or even a hundred patients were not unfrequently herded together in one airing court and in one set of apartments. This practice belonged to the old system of indiscriminate treatment and negligence. I had, many years ago, the opportunity of seeing the change from large to small classes, in the York Asylum, and was confirmed by it in the opinion which I had previously formed on comparing the condition of the large companies of patients in that institution with the smaller divisions in another establishment. In the one, thirty patients were frequently found in one division; in the other, the number in each room rarely if ever exceeded ten. Here I generally found some of the patients engaged in some useful or amusing employment. Every class seemed to form a little family; they observed each others eccentricities with amusement or pity; they were interested in some degree in each others welfare, and contracted attachments or aversions. In the large society, the difference of character was very striking. I could perceive no attachments and very little observation of each other. In the midst of society every one seemed in solitude; conversation or amusement was rarely to be observed—employment never. Each individual was pursuing his own busy cogitations; pacing with restless step from one end of the enclosure to the other, or lolling in slothful apathy on the benches. It was evident that society could not exist in such a crowd.*

In accordance with these views, the instructions for the Wakefield Asylum directed the building to be so arranged as to divide the patients into classes of *twelve* or *thirteen*. But the patients subsequently increased so much that it became necessary to double the number in each class. At the celebrated Hanwell Asylum near London, as many as fifty or sixty patients are associated into one class with a single day-room, gallery and airing court for the whole number. Judicious observers consider this a serious defect in this otherwise well ordered institution.

If called on to fix the number for each class of patients in the New-York State Asylum, I should say the maximum ought not to exceed 15 or 20. If the building be so constructed as to render such a minute sub-division impracticable, this number might be doubled, and the class

*Tuke's introduction to Jacobi on Hospitals for the Insane.

separated into two parts with an attendant for each. Wherever I have observed a large number of insane associated together, I have always found confusion and bad arrangement. At Salpêtrière, the large and in some respects admirably conducted establishment, at Paris, for female lunatics, of whom there are more than 1500, the incurables are allowed to herd together in large numbers. Deprived of reason, and confined to a small space, without occupation or any thing to divert the mind, it is not surprising that the worst passions are elicited, that the moral sense is entirely lost, and that human nature is here found in its most degraded and revolting state.

Each one of the classes should be distinct from the other, not only in its sleeping rooms, gallery and day room, but in its airing ground and method of ingress and egress.

The proportion of attendants to the insane, is another interesting subject of consideration in connection with classification. At the Sieburg hospital in Germany, which it is believed receives both pay patients and paupers, there is, on an average, one attendant to every seven patients. At the Hanwell Asylum there is *one* attendant to *seventeen* men, and *one* to *eighteen* women. At the Wakefield Asylum, which like the last, is also a purely pauper establishment, the proportion is *one* to rather more than *twenty-two*. In the York Asylum for the lowest class, chiefly paupers, there is *one* attendant to *eleven* patients, and at the Friend's Retreat, at the same place, for the lower class the proportion is *one* for *eight*, including an upper attendant who has charge of the labor department, &c. In the hospital of Charenton in France, where some patients are received at a moderate compensation and others supported by government, the proportion of attendants is *one* to every *nine* or *ten*.

In considering a plan for classification, several circumstances must be taken into account.

1st. Rank or station in life. The want of any degrees in this respect in the State asylum, which is for paupers, calls for no degree of distinction and very much simplifies the remaining mode of classification.

2d. *Sex*.—There must be a complete separation of the sexes. Each one of the sexes then will form a grand division, which must be divided into classes according to

3d. The mental condition and habits of the insane.

The details of classification cannot here be entered into; they must be left to the practical judgment of the physician, who will know both the number and the state of his patients, and the extent and arrangement of the buildings they are to occupy. Of course those patients are to be associated together who will least annoy each other.

The noisy and violent should be separated from the others; of these there may be different degrees and sub-divisions.

The dirty and unmanageable should be placed together.

The melancholy and suicidally inclined :

The quiet and decently behaved :

The convalescent :

Those under special treatment, &c. &c. &c.

In connection with classification, the absolute necessity of providing a **RECEPTION ROOM**, or *room of observation*, may be mentioned. In every large institution for the reception and treatment of the insane, a distinct apartment of this kind should be provided. This should be situated near the rooms of the principal officers, so as to be under their immediate and constant inspection. In this apartment the newly arrived patient should be placed, and his case minutely examined before his final location is determined. The character of an insane patient cannot be judged of at a glance; its developement requires time and observation. A proper knowledge of the case will prevent the mild from being classed with the violent, the harmless with the malevolent, the sensitive with the grossly disgusting, and thereby save the patient from losing self-control, or from being hurried into wretchedness or despair.

The hours for rising, dressing and washing, for assembling in the chapel to attend morning prayers, for meals, labour, occupation, amusement, walking, riding, &c. should be regulated by the most perfect precision. The subordinate functionaries should not be left to the exercise of *their* discretion in any of these things; the utmost neatness must be observed in the dormitories; the meals, which should be as good and wholesome as circumstances may allow, must be orderly and comfortably served; the services of the chapel must be regularly attended by the nurses, domestics, and all those patients who are well enough, except such as may have conscientious scruples; the physicians and assistants must make their visits at certain hours, carefully observing everything relating to the cleanliness, temperature and ventilation of the house, as well as to the health of the patients.

The physician in chief, accompanied by two assistants and the apothecary's apprentice, will in a more especial manner make a thorough visit to the classes of patients under **MEDICAL TREATMENT**. These will comprise all the recent, and it may be said curable cases. The history, symptoms, and progress of each, will, according to circumstances, be more or less minutely examined; and the result of these observations with the treatment will be dictated by the physician and entered in a book carried for that purpose by one of the assistants. **DIET**, both in quantity and quality, should be as regularly prescribed as medicine, and for the purpose of facilitating and systematizing the operations of the kitchen, another assistant will carry sheets of paper expressly prepared for the occasion, on which the food ordered will be regularly entered and transferred to the cook on the completion of the visit; the great mass of patients, those not under special medical treatment, using of course without change the regularly prepared food of the house.

To give precision and facility to the apothecary in the preparation and distribution of medicines, his apprentice will take down in the same manner the medicines prescribed. This method is followed in all the large French hospitals, and is found to be the only means of doing full justice where large numbers of patients are assembled together.

These daily visits of the physician will constitute his highest duties, for on these occasions he must investigate the secret workings of disease and devise the remedies, whether medical or moral, for each par-

ticular case. Attendance on this most interesting class of patients must be the first object of his life, for from the performance of this duty, must spring the whole treatment, medical, moral, physical, and dietetic. The physician will also then make a general examination of the establishment in reference to the condition of the other inmates, and especially to their employments. I will not follow him any further in the performance of his daily labour, nor enter into the details of the various duties of the other officers. The above is merely given as an example of a system which should be thoroughly established and enforced in every department of the service.

As the purely medical treatment will be confined to a small minority, it becomes an object of primary importance to provide the great mass of patients with the means of MORAL and PHYSICAL TREATMENT, or in other words, with such AMUSEMENTS and OCCUPATIONS as will divert the mind, and exercise the body. Shut up any number of persons in the full enjoyment of their mental faculties without occupation, and it needs but little knowledge of human nature to predict how much unhappiness and mischief will be engendered. It is not surprising then, that the insane when deprived of liberty, and doomed to perpetual idleness, should fritter away their existence in vain attempts to liberate themselves from restraint, or to carry into effect their favorite visionary schemes, or fall into a state of disgusting apathy; useless alike to themselves and to society. By employment the recovery of the curable will be accelerated and confirmed, while the lives of the incurable will be rendered more happy and useful. The latter class forms by far the largest proportion of the inmates of our asylums, and if labor be not systematically introduced, and thoroughly carried into effect, in our pauper establishments, these will soon degenerate into mere prisons. I think it is not going too far to say, that two-thirds of the inmates of institutions of this description might be usefully employed; for it is presumable that more than that proportion of this class of persons has been accustomed to manual labor; and where this has been the case, it will not be so difficult to induce them to follow some occupation, as it will those accustomed to a life of ease. A public establishment like this has another advantage—a large proportion of the cases being chronic, these will remain inmates for a long time, for many years, and by the force of example and perseverance can be induced to labor. Some can even be taught new trades. “In all institutions for paupers, workshops should be provided, in which the patients may perform different branches of mechanical labor, to which they have been previously accustomed; but where the apparatus is very expensive, and the labor not likely to be useful to the institution, or profitable, the patient may by kind perseverance be induced to learn some mechanical art which he had never previously attempted. At the asylum at Hanwell, there are no less than six shoe makers now at work, who never did any thing of the kind before their admission; and three who have been discharged cured, also learned the trade during their residence in the asylum. Spinning of twine and rope-making are also generally liked; many of the patients prefer them to any other occupation, and they have all been taught to do these works at the asylum.” “And

as there are bricklayers, joiners, tanners, blacksmiths, shoemakers, tailors, brushmakers, twinemakers, basketmakers, pottlemakers and coopers, all at work about the institution, it is most probable a mechanic will be able to select from amongst them some occupation with which he has been previously acquainted, or which he may like to learn." *

The most striking fact derived from the recent reports of the best conducted asylums of those countries, in the old world, where these institutions are most philosophically and successfully managed is the very large and increasing number of patients usefully employed. Miss Martineau's beautiful account of the Hanwell institution, would seem to be a creation of her own imagination; yet I can aver from personal observation, that the proportion of useful laborers is almost incredible. Dr. ELLIS, in his observations on the management of the Hanwell Asylum, says "Indeed, on an average, 454 patients out of the 612 are daily employed." The patients in this establishment are all paupers and it is supposable that they have nearly all been accustomed to labor of some kind or other; hence the secret of the great number employed. By a late report of the *Dundee Asylum*, in Scotland, it appears that during the year just elapsed the daily average number of patients in the house was 129 and that the number generally employed was 92. If by this it be meant that the daily average number employed was usually so high as 92 (and this is doubtless literally the fact) this institution has been very successful in the adaptation of employment to the habits and tastes of the patients, and in carrying out the great principal of occupation. No less than twenty seven varieties of employment are enumerated, and among others "weaving linen for sheeting, cotton bagging, &c., breaking stone for the turnpike road, gardening, trenching and laying out grounds, spinning, winding for weavers, shoemaking and mending."

FERRUS, in his work on the insane says, "at Bicêtre (a hospital near Paris,) during the last eight years, taking advantage of the various kinds of work there executed, and daring to assume the responsibility of placing in the hands of the insane the necessary instruments, we occupy daily when the weather permits, more than a hundred and fifty lunatics at labor on the terraces, at horticulture, at mason-work, at plastering, at blacksmith-work, at joining and even at timber work. No accident has yet happened to lessen the satisfaction experienced in seeing our patients labor and it would take a most unexpected and severe one to balance the advantages of employment. The health of the insane and their general condition have been improved by this measure; their recoveries have been more rapid and their relapses more rare. A maniac placed at the wheelbarrow a few days after admission, and just as he is beginning to recover from a violent attack of delerium, may, profiting by a temporary repose from labor, throw his cap into the air and give utterance to extravagancies; but encouraged by the example of his fellow laborers and the exhortations of his

* Ellis on Insanity.

attendants, he resumes his work and at evening on entering his chamber, falls into a most calm and refreshing sleep."

Employment has not always been urged on right principles. Patients have too often been asked to labor as a duty, or as a matter of course. This would answer for a certain description of lunatics; for those who are imbecile, who have neither wants nor desires, and whom *motives* do not influence. But there is another class, who as much require motives to action, as persons of sound mind. Few rational persons would work day after day for the mere pleasure of working—so it is with the insane. Something must be associated with their labor; either the idea of benevolence, the hope of recovery and of returning home, or the expectation of reward. Reward in one shape or another, let it be in some delicacy of diet, or article of clothing, or money, or other inducement, must be the motive with the great mass of patients. Let those who will not receive a compensation for their services give their labor for some benevolent object. The cultivation in this manner of the higher sentiments, cannot fail while it improves the moral character, to draw off the attention from those subjects that oppress the mind.

Even in an exclusively pauper institution like that at Hanwell, there is found a class of females, who from education and habits dislike the ordinary sewing and mending for the other inmates so much that they cannot be persuaded to engage in it, but who might be readily induced to employ themselves in fancy needlework and embroidery. "With the view to obviate the evils of idleness in this class, the matron hit upon the plan of establishing a bazaar." The expedient succeeded perfectly, the patients, voluntary labor supplied the necessary articles, which were readily sold to visitors, and with the proceeds were purchased an organ for the benefit of all, and various things for individual gratification. In this asylum no less than 55 male, and 33 female patients are employed in farming and gardening, under one farmer and two gardeners; from 4 to 6 female patients under one dairy maid, attend to the milking; one sane female assisted by eight patients makes all the bread and beer of the establishment, containing altogether 660 persons; and the washing for 612 patients and servants is managed by one laundry-maid, assisted by from 16 to 20 patients. If to these domestic occupations be added the various mechanical employments in which patients are enlisted, we shall not be so much surprised at the large number heretofore mentioned, as being engaged in useful labor.

In order to show what kinds of occupation may be best suited to the State asylum, I will give some facts from a paper published by the undersigned in the New York Medical Journal on the statistics of the Bloomingdale Asylum. Although these institutions will not be filled by patients from the same walks in life, yet a large proportion of them will be from the same classes and we have no other date for comparison.

"All the different occupations found on record amount to 82, variously distributed among 804 patients, including 54 who are distinctly put down as having "no profession." Of the 82 different occupations 35

(considerably less than one half) furnish 663 or nearly five-sixths of all the cases of insanity. If the 54 mentioned as having no occupation be taken from the whole number, then the 35 professions furnish seven-eighths, while the remaining 47 give but one-eighth of all the instances of insanity enumerated above. Taking these as data, does insanity fall proportionably on persons engaged in the various pursuits of life? or do these operate as predisposing or exciting causes?

Table of professions, occupations, and condition, that furnish the largest number of insane, arranged according to plurality.

Farmers,	106	State Prison Convicts, ...	11
Merchants and Traders,	89	Masons,	11
Clerks,	45	Teachers,	10
Laborers,	35	Cabinet-makers & Turners, ..	8
Seamstresses,	29	Painters and Glaziers,	8
Carpenters,	25	Apothecaries,	7
Grocers,	25	Printers,	7
House-servants,	22	Carriage-makers & Wheel-	
Lawyers,	20	wrights,	6
Tailors,	19	Cartmen,	6
Students,	19	Clergymen,	6
Iron Founders and Smiths, ..	18	Manufacturers,	6
Seamen,	17	Bakers,	5
Sea Captains,	16	Butchers,	5
Curriers and Leather Dress-		Gentlemen,	5
ers,	16	Hatters,	5
Shoemakers and Saddlers, ..	15	Watchmakers, Jewellers,	
Farm laborers,	12	and Silversmiths,	5
Physicians,	12		
Tavern keepers,	12		
			663

It is here shown that the producing classes, including farmers, mechanics, laborers, &c. and making up the great bulk of inhabitants furnish 395 out of 804 cases of insanity, or 49 $\frac{1}{4}$ per cent. Of these, the workers of the soil, including 106 farmers, 12 farm laborers, 2 planters, and 2 gardeners, amount to 122, or rising 13 $\frac{1}{2}$ per cent; and mechanics to 206, or rather more than 23 per cent. of the whole number of vocations ascertained. The proportion of the producing classes will of course be much greater in the State than in Bloomingdale Asylum. Extensive provision then should be made for those kinds of occupation, which are most common among the laboring classes, and particularly for those which are most attractive; such as those of the carpenter, cabinet-maker, farmer, gardener, tailor, seamstress, shoe-maker, basket-maker, cane-worker, &c. &c.

At the risk of being considered tedious and impracticable, I have brought together these facts and authorities, because I am deeply impressed with the importance of occupation in so large an asylum, and of that occupation the first object of which will be the recovery of the insane, "for as soon as the management of the farming and household economy ceases to be a simple instrument towards the cure of the patients, so soon will the character of the institution instantly sink into

that of a mere nursing establishment, in which, in which the economical principle predominates, and the medical influence is subject to it."

In an American institution, even for paupers, I would not limit the means of mental diversion to productive labor, but I would furnish them with every variety of amusement. As so large a proportion of the inhabitants of this country take an interest in reading, it will be advisable to establish a library, (to consist chiefly of books of narrative,) and to furnish a supply of the best weekly and other papers and periodicals. I have known insane patients benefitted by the daily practice of reading and writing, and cannot conceive it to be altogether visionary and impracticable in so large an establishment, to institute something like a school, more particularly for a class of patients denominated imbecile, who are not entirely destitute of intelligence at the same time that they are tractable, and whose minds may be compared, as philosophers have done those of infants, to a "tabula rasa." Even the mechanical employment of the organ of voice in uttering articulate sounds in reading, and of the hands in writing copies, might be made of immense service. But if the insane can be taught new trades, as the experience of the Hanwell Asylum clearly demonstrates, it need not be doubted that they may make some advances in other kinds of knowledge.

RECAPITULATION OF OFFICERS NECESSARY IN AN ESTABLISHMENT FOR A THOUSAND INSANE PATIENTS.

I.	Physician in chief and Director,.....	1
II.	Adjunct Physician,	1
III.	Assistant Physicians, 1 to every 200 patients, ...	5
IV.	Apothecary and assistant,.....	2
V.	Warden,	1
VI.	Clerk, one or more,	
VII.	Steward,	1
VIII.	Chaplain,.....	1
IX.	Matron,	1
X.	House-keeper,	1
XI.	Overseers, 1 to each building,.....	4
XII.	Farmer,.....	1
XIII.	Gardener,	1
XIV.	Mechanics of various kinds to conduct different trades,	
XV.	Attendants and Nurses, 1 to every 15 or 20 patints, making altogether, from 50 to 70.	

As mentioned before, this number of officers is calculated for an institution supposed to contain a thousand patients. If but a single building be completed and opened, the plan must of course be modified, but 250 will require more principal officers in proportion, than 1000 patients. Indeed they will require most of the principal officers enumerated, except the four overseers, the four assistant physicians, and perhaps the apothecary's assistant.

In order to keep a correct record of cases, it will be necessary to draw up and send to the various county and town authorities in the

State, a series of questions relative to the history and symptoms of insanity ; as many of which, as may be applicable to the case in question, shall be answered before the patient can be admitted. These answers may be transmitted with the necessary papers from the justices and overseers at the time the patient shall be sent to the asylum.

Who shall pay for the erection of the State asylum at Utica ? Who will support it ? And in what manner shall it be supported ?

The simple, and it appears to the undersigned, just answer to the first question, is, all those counties which have not already built hospitals for the special treatment of the insane.

The reply to the second question must be : With the exception named in the first answer, all the counties in the State ; and those counties must not be simply *permitted*, but *obliged*, to send their insane paupers, otherwise they will find it so much cheaper to keep them locked up in the ordinary poor houses, that a small proportion of them will be sent to the asylum. As to the *third* question : In what manner shall it be supported ? I cannot conceive a more equitable method than that adopted in England, of charging to each parish so much a head for every patient sent. Let the trustees of the New-York State Lunatic Asylum, on opening the institution, fix a certain rate of board, to be charged alike to all the counties. If on the expiration of the first year, the income exceed the expenses, then reduce ; if on the contrary it fall short, then raise the price of board.

Another question arises in connection with this subject : Shall any other than pauper patients be received into this institution ? Knowing from long experience in managing an institution where patients from all grades in life are received, the insuperable difficulties in classifying and satisfying so great a variety, and in preventing on the one hand, heart-burnings and jealousies, and on the other, wounded pride and arrogance ; and considering the present existence of various well-organized asylums, where pay patients may have every degree of comfort or luxury, I do not hesitate respectfully to answer this query in the negative.

Wishing you every possible success in your useful and philanthropic labors,

I am your obed't serv't,

JAMES MACDONALD.

No. 29 Clinton Place, New-York, }
January 11th, 1841. }

XI. HISTORICAL SKETCH.

The first grand movement of PINEL, in behalf of the insane.

"France," says Esquirol, "was the first nation to offer the spectacle of nearly 3,000 lunatics kept in confinement without chains, without blows, and without unkind treatment."

Fifty years ago, lunatics were in chains and dungeons over the whole of Europe. It was in the year 1792, during the atrocities of the French revolution, and under peculiar circumstances, that PINEL, the physician and philanthropist, justly styled the great reformer, ventured, in the course of a very few days, to strike the shackles from 53 lunatics, including some of the worst cases in the *Hospital of Bicêtre*, near Paris. What a revolution followed from a course before deemed impracticable or disastrous! The furious madmen who had destroyed hundreds of wooden utensils in the Bicêtre, renounced their habits of violence. Others who tore their clothes, and raved in filth and nudity, became clean and decent. Tranquillity and harmony succeeded to tumult and disorder; and many who had previously been deemed incurable, were restored to reason.

This is the boldest and noblest achievement recorded in the annals of insanity. The morning of its accomplishment first dispelled the midnight gloom of lunacy. Then, for the first time, the guiltless maniac was released from the thralldom which associated him with criminals and brutes, taken by the hand as a brother, and acknowledged to be worthy of the kindest attention, commiseration and sympathy.

The following brief account of the commencement of the labors of Pinel, extracted from a paper read by his son, before the Royal Academy of Sciences, commends itself to the attention of every reader:

"Towards the end of 1792, Pinel, after having many times urged the government to allow him to unchain the maniacs of the Bicêtre, but in vain, went himself to the authorities, and with much earnestness and warmth, advocated the removal of this monstrous abuse. Couthon, a member of the commune, gave way to M. Pinel's arguments, and agreed to meet him at the Bicêtre. Couthon then interrogated those who were chained, but the abuse he received, and the confused sounds of cries, vociferations and clanking of chains, in the filthy and damp cells, made him recoil from Pinel's proposition. 'You may do what you will with them,' said he, 'but I fear you will become their victim.' Pinel instantly commenced his undertaking. There were about fifty whom he considered might, without danger to the others, be unchained, and he began by releasing twelve, with the sole precau-

tion of having previously prepared the same number of strong waistcoats, with long sleeves, which could be tied behind the back if necessary. The first man on whom the experiment was to be tried was an English captain, whose history no one knew, as he had been in chains for forty years. He was thought to be one of the most furious among them. His keepers approached him with caution, as he had in a fit of fury, killed one of them on the spot with a blow from his manacles. He was chained more rigorously than any of the others. Pinel entered his cell unattended, and calmly said to him, 'Captain, I will order your chains to be taken off, and give you liberty to walk in the court, if you will promise me to behave well, and injure no one.' 'Yes, I promise you,' said the maniac, 'but you are laughing at me—you are all too much afraid of me.' 'I have six men,' said Pinel, 'ready to enforce my commands, if necessary. Believe me then, on my word, I will give you your liberty if you will put on this waistcoat.'

"He submitted to this willingly, without a word. His chains were removed, and the keepers retired, leaving the door open. He raised himself many times from his seat but fell again on it, for he had been in a sitting posture so long that he had lost the use of his legs. In a quarter of an hour he succeeded in maintaining his balance, and with tottering steps came to the door of his dark cell. His first look was at the sky, and he cried out enthusiastically, 'how beautiful!' During the rest of the day he was constantly in motion, walking up and down the staircases, and uttering short exclamations of delight. In the evening he returned of his own accord into his cell, where a better bed than he had been accustomed to had been prepared for him, and he slept tranquilly. During the two succeeding years that he spent in the Bicêtre, he had no return of his previous paroxysms, but even rendered himself useful by exercising a kind of authority over the insane patients, whom he ruled in his own fashion.

"The next unfortunate being whom Pinel visited was a soldier of the French guards, whose only fault was drunkenness; when once he lost his self command by drink, he became quarrelsome and violent, and the more dangerous from his great bodily strength.

"From his frequent excesses, he had been discharged from his corps, and he had speedily dissipated his scanty means. Disgrace and misery so depressed him that he became insane; in his paroxysms he believed himself a general, and fought those who would not acknowledge his rank. After a furious struggle of this sort, he was brought to the Bicêtre in a state of great excitement. He had now been chained for ten years, and with greater care than the others, from his frequently having broken his chains with his hands only. Once when he broke loose, he defied all his keepers to enter his cell, until they had each passed under his legs; and he compelled eight men to obey this strange command. Pinel, on his previous visits to him, regarded him as a man of original good nature, but under excitement incessantly kept up by cruel treatment; and he had promised speedily to ameliorate his condition, which promise alone had made him more calm. Now he announced to him that he should be chained no longer, and, to prove

that he had confidence in him, and believed him to be a man capable of better things, he called upon him to assist in releasing those others who had not reason like himself, and promised, if he conducted himself well, to take him into his own service. The change was sudden and complete. No sooner was he liberated than he became attentive, following with his eye every motion of Pinel, and executing his orders with as much address as promptness. He spoke kindly and reasonably to the other patients; and during the rest of his life was entirely devoted to his deliverer. And 'I can never hear without emotion,' says Pinel's son, 'the name of this man, who some years after this occurrence shared with me the games of my childhood, and to whom I shall always feel attached.'

"In the next cell were three Prussian soldiers, who had been in chains for many years, but on what account no one knew. They were in general, calm and inoffensive, becoming animated only when conversing together in their own language, which was unintelligible to others. They were allowed the only consolation of which they appeared sensible—to live together. The preparations taken to release them alarmed them, as they imagined the keepers were come to inflict new severities; and they opposed them violently when removing their irons. When released, they were not willing to leave their prison, and remained in their habitual posture. Either grief or loss of intellect had rendered them indifferent to liberty.

"Near them was an old priest, who was possessed with the idea that he was Christ; his appearance indicated the vanity of his belief; he was grave and solemn; his smile soft, and at the same time severe, repelling all familiarity; his hair was long, and hung on each side of his face, which was pale, intelligent and resigned. On his being once taunted with a question, that 'if he was Christ he could break his chains,' he solemnly replied, '*Frustra tentaris Dominum tuum.*' His whole life was a romance of religious excitement. He undertook, on foot, pilgrimages to Cologne and Rome, and made a voyage to America for the purpose of converting the Indians; his dominant idea became changed into an actual mania, and on his return to France he announced himself as the Saviour. He was taken by the police before the Archbishop of Paris, by whose orders he was confined in the Bicêtre as either impious or insane. His hands and feet were loaded with heavy chains, and during twelve years he bore with exemplary patience, martyrdom and constant sarcasms.

"Pinel did not attempt to reason with him, but ordered him to be unchained in silence, directing, at the same time, that every one should imitate the old man's reserve, and never speak to him. This order was rigorously observed, and produced on the patient a more decided effect than either chains or the dungeon; he became humiliated by this unusual isolation, and introduced himself to the society of the other patients. From this time his notions became more just and sensible, and in less than a year he acknowledged the absurdity of his previous prepossessions, and was dismissed from the Bicêtre.

"In the course of a few days, Pinel released fifty-three maniacs

from their chains ; among them were men of all conditions and countries ; workmen, merchants, soldiers, lawyers, &c. The result was beyond his hopes. Tranquillity and harmony succeeded to tumult and disorder ; and the whole discipline was marked with a regularity and kindness, which had the most favorable effect on the insane themselves ; rendering even the most furious more tractable."

XII. TREATMENT OF INSANITY.

Extracts from an Essay, by Pliny Earle, M. D. of Frankford, Pennsylvania.

In England, the disease is more prevalent in the counties of York, Wilts, Stafford, Durham, Rutland and Gloucester, than in any other parts of the country. The greatest proportionate number of lunatics and idiots is in Rutland, where there is 1 for every 497 persons; and the smallest number in Lancashire, where there is but 1 for every 1960 persons. In Wales, the number of insane, relative to the whole population, is very small. The remark is also applicable to the Celtic tribes in other parts of Great Britain; and, where there is a union of Celtic with Saxon and Norman blood, the disease is scarcely known, except in cases of anormal structure, or malformation of the cranium. In these instances the individuals are idiotic.

It is a fact worthy of notice that, as a general rule, insanity is but little known in those countries, the inhabitants of which are either in a savage or a barbarous state of society; whereas it prevails to the greatest extent in nations occupying the highest rank in civilization. The celebrated traveller, Baron Von Humboldt, found but a few cases among the aborigines of America. It is rare, also, among the negroes of the West Indies. The peasantry of Wales, the natives of the Hebrides, and of the most secluded parts of Ireland, are almost entirely free from it. It is comparatively infrequent in Spain and Portugal, although idiocy is very common in those countries. In Russia and in China, it is said that it but seldom occurs; but, in regard to the British East Indies, Sir Andrew Halliday says, "Insanity is a frequent disease among the natives of every caste. The attacks are generally sudden, and often violent; but, under proper medical treatment, they are easily removed."

MORAL TREATMENT OF INSANE.

Formerly, the unfortunate individual subject to maniacal hallucination was supposed to have violated the laws of Heaven, and thus incurred the displeasure of a Creator, the phials of whose wrath were consequently poured out, in this form, upon the offender. But the sentiments of the community have changed. The lunatic is no longer "a reproach and a by-word;" his family are no longer shunned as being partially implicated in his unknown offence; but, as a sufferer under one of the most afflicting maladies to which our race is subject, the former receives that kindness and attention which the human heart, alive to the sufferings of our fellows, so well knows how to bestow, while the latter partakes of the fountain of sympathy gushing from a thousand bosoms. The sufferings to which maniacs were formerly,

and, in too many instances, still are, subjected—sufferings, which place recovery beyond hope,—their imprisonment and confinement in dungeons, their tortures under manacles and chains, their deprivation of food, of clothing, and of all the comforts of life, are such that we are almost struck with horror at their recital. The noble philanthropist, M. Pinel, to whose untiring exertions the lunatics of France are indebted for the amelioration of their condition, has given a thrilling description of the vast accumulation of misery, which, during his investigations, was presented to his view. In England and Scotland, although some hospitals existed, the wretchedness and inhumanity, were, according to Halliday, previously to 1815, equally great. In “Bedlam,” or Bethlehem Hospital, in London, at that time, the patients, “as wild beasts, were shown for sixpence for each person admitted.”

A fundamental error formerly existed with regard to the nature of insanity; it was believed that the mind is itself diseased, instead of the organ through which it is manifested. But disease is the minister of death, and the mind a scintillation from the fire of Heaven, being free from the power of the latter, is consequently exempted from the encroachments of the former. It is, therefore, now acknowledged, that insanity is produced by a cerebral lesion, and that, too, generally of a functional nature; it necessarily follows that the disease is within the reach of remedial agents. But chains and a dungeon are miserable prescriptions to a pathological state of the most delicate organ of the human frame, an organ which is called constantly into action by an invisible, but powerful and controlling agency. Experience has fully attested the truth of this assertion. It has also proved that mild and gentle means, pleasing amusements, light labor, and affectionate treatment, by those around the patient, are powerful auxiliaries in promoting a cure. Since this has been demonstrated, the number of lunatic asylums has greatly increased, for, in those institutions, the system of treatment can be more completely adopted than in most private families. England, Scotland, Ireland, and most of the countries of continental Europe are supplied to a greater or less extent with these institutions, and there are several of the kind in southern Asia. Our country has caught the spirit, and is imitating the good example of her transatlantic sisters. Already we have no less than seventeen lunatic asylums in operation. In these, or in such of them as are of the most approved construction, the patients are classified according to the degree of their mental alienation, thus making three divisions; 1st, those in whom the disease is violent and unabated; 2d, the milder and the convalescing; and 3d, the convalescent. The individuals of each class occupy a suite of rooms communicating with each other by a common hall, and also with a yard, in which they are permitted to exercise at suitable hours. The different classes have no communication with each other. The patients are treated medically whenever such treatment is necessary; but, as in the European asylums, the management of all cases, indiscriminately, in this matter, has been abolished. The physician now endeavors “to combine moral and medical treatment, founded on the principles of mental philosophy and physiology.” Hence, in many

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cases, a simple, but wholesome and nutritious diet has supplanted the long category of medicines which have sometimes been employed.

It is now conceded by all who are best acquainted with the management of the insane, that the first element in their moral treatment, is their *removal from acquaintances and former associations*. One prominent advantage in such removal is the promotion of the second element of treatment, that of withdrawing the mind from its hallucinations, and attracting it into a new current of thought. For the full accomplishment, however, of this latter object, after the removal to a suitable place has been made, the almost unremitting attention of judicious caretakers is required. New objects must be presented to the view, new incentives to the mind, and no expedient which would be likely to attract the attention and divert the thoughts must be left untried. Hence, in those institutions for the treatment of this disease, which have recently been established, as well as those older establishments which have kept pace with the progress of knowledge, *manual labor*, in many of its forms, *amusements*, and sources of *literary and scientific entertainment* and instruction have been introduced among the patients. In short, instead of being degraded to a level not only with criminals, but with the brute creation, and consequently shut out from association with mankind, and placed beyond the influence of kindness and of sympathy, the insane are now treated as intelligent and immortal beings, the affections and sympathies of whose hearts are still alive to the influences which operate upon those of mankind in general.

Duration.—The duration of insanity varies from a few days, in one extreme, to forty, fifty, and even sixty years in the other. The average time is said to be about thirteen and a half years, but it cannot fail of being materially diminished by the modern enlightened mode of treatment. Individual cases may, perchance, be even prolonged; not, however, by any injury arising from the treatment, but from a mitigation in the severity of the disease by which the day of death is postponed. In a memoir presented to the French institute, M. Pinel states, that more are cured during the first month of the disease than in any one of the succeeding, and that the average duration of those that are cured is from five to six months. M. Esquirol and S. Tuke give a longer period as the mean time of continuation. The former says, that of 2,005 females admitted at the Salpêtrière, Paris, the greatest number of cures was effected in the two first years, and that the average was "somewhat short of a year." The probability of a recovery after the *third* year is considered as about one to thirty. "I have constantly observed," says Dr. Prichard, "that in the course of the *first month*, a very marked remission takes place" in the disease.

Importance of Early Treatment.—It was left for the physicians of the present age to demonstrate, that as great a proportion of patients suffering under acute mania may be cured as of those of any other acute disease. This has been satisfactorily proved. A great remissness, however, exists upon the part of the friends of this unfortunate class of the community, in neglecting to place them in a hospital during the earliest stages of the malady. "It frequently happens," says the eighteenth

report of the asylum at Frankfort, Pennsylvania, "that applications for admission into our asylum are not made until after the most promising period for recovery has elapsed." Similar complaints are urged in the reports of other hospitals.

The following table exhibits the advantage of early treatment :

Asylums.	Time.	Per ct. of cures in recent cases.	Per ct. of cures in chronic cases.
Dr. Burrows',		91.32	35.18
Vermont State,	3 years	89.	28.02
" "	1840	88.20	28.05
Massachusetts State,	1833 to 1840	87.25	19.05
" "	in 1840	91.25	22.05
Ohio State,	1839 & 1840	85.50	41.17
Bloomington,	in 1839	83.87	25.39
Retreat, Conn.,	6 years	75.95	
" "	4 years	91.60	25.83

The average per cent. of the recent cases is 87.10, while that of the chronic cases is but 28.28. The term "recent" is generally applied to all cases of less than one year in duration, and "chronic" to all others. This signification of the terms is recognized in all the above mentioned asylums, excepting the Connecticut Retreat. In that institution I think the term "recent" is restricted to cases of less than three months duration.

Religious Worship.—Some of the asylums of both Europe and America have a regular chaplain connected with them ; while, in others, religious services are performed under the direction of clergymen, who volunteer their services. There are but four institutions in this country, in which there is not some religious devotional exercise ; and, wherever this duty has been observed, it has been accompanied by beneficial results.

Amusements.—It is universally acknowledged that suitable amusements are efficacious adjuvants in restoring the excited and deluded minds of the insane to their healthy standard of calmness and accuracy of perception. Hence, in nearly every asylum, whether foreign or domestic, the means are furnished by which the patients may engage in a diversity of games. Entertainment is afforded by an occasional tea-party or dancing party, and the means of intellectual gratification and instruction are supplied by books, newspapers and magazines. Those patients who have a particular taste or predilection for any special science, or in whom such taste can be awakened, ought to be supplied with the means of pursuing it. At the Frankfort asylum, during the past year, a gentleman who had been several months under medical treatment, became, by an incidental circumstance, interested in botany. He immediately commenced the study of it, devoting himself with the most untiring assiduity to the pursuit. Books, and a microscope to facilitate in the analysis of flowers, were furnished him, and he was permitted to ramble alone through the woods and fields, for the purpose of collecting specimens. He improved very rapidly in both physical and mental health, and soon returned to his home perfectly restored.

Music has been tried as a curative means in many asylums. We should suppose, *a priori*, that it might be attended with beneficial results. In order, however, that this should obtain, it must be managed with a most discriminating judgment. It must be adapted to each patient, according as he is depressed or exalted; otherwise, the melancholy in the former case might be augmented, and the exaltation, in the latter, increased to fury. Esquirol, whose experience in this respect is undoubtedly greater than that of any other person now living, remarks, "I have tried it (music) in every manner, and under circumstances the most favorable to success. Sometimes *it has irritated the patient even to fury*; often it has tended to divert the attention, but *I cannot say that it has contributed to a cure*. It has been advantageous to the convalescent." * * *

After some further observations, the author finally concludes, "If music does not cure, it diverts, and consequently soothes. It produces some alleviation, both physical and moral; it is evidently useful to the convalescent, and consequently it is not necessary to discontinue its use."

Attendants.—How perfect soever may be an asylum in its organization and administration, how complete soever it may be in all the physical comforts which wealth may purchase or ingenuity invent, how diverse soever may be the means of recreation and amusement; the great object for which these have been furnished, that of effecting a cure in the patients, will be tardily, if indeed it be ever accomplished, unless the attendants, those who have the immediate care of those patients, are of a suitable character. Complete dominion over the passions, a well cultivated mind, unyielding firmness, untiring energy, and an ever-watchful vigilance, united with mildness, gentleness, an affable and respectful deportment, and a benevolent, sympathising, Christian mind, are necessary to constitute the perfect attendant. The nearer this standard be approached, the better will be the care extended to the patients, and the more rapid will be the cures. "*We will not,*" says one of the reports of the M'Lean Asylum, "*continue any male or female attendant, whom we cannot invite into our family and seat at our table; and with whom we could not confidently place our wives, sisters and brothers.*" The rule that immediate dismissal shall be the penalty of striking a patient, is adopted in most asylums, and should be in all. Could the standard which we have mentioned be reached, perhaps no such rule would be necessary.

Coercion and Punishment.—The straight-jacket, manacles, and chains have nearly been abandoned in the best institutions for the treatment of lunatics. The first however, is still used occasionally in some of the British Asylums, and is not entirely abandoned in some of those of the United States. A change of location, the deprivation of a privilege, the shower-bath, and other punishments comparatively mild, are often sufficiently effective. The "tranquillizing chair," and mits and muffs, are still employed occasionally in nearly all asylums. In the Connecticut Retreat, as says one of the reports of that institution, "in case coercion and confinement become necessary it is impressed upon

his (the patient's) mind, that this is not done for the purpose of punishment, but for his own safety and that of his keepers." "In no case," says the same report, "is deception of the patient employed or allowed; on the contrary, the greatest frankness as well as kindness, forms a part of the moral treatment. His case is explained to him, and he is made to understand, as far as possible, the reasons why the treatment to which he is subjected has become necessary. By this course of intellectual management, it has been found, as a matter of experience, at our institution, that patients who had always been raving when confined without being told the reason, and refractory when commanded, instead of being entreated, soon became peaceful and docile." Sir A. Halliday insists upon the necessity of honorable and candid dealing with the insane, and urges the importance of the fact, that they are generally, if not universally, affected by kindness, while they never forget injuries, insults, duplicity or imposition. An appeal to the sympathies of the most maniacal patients, while, at the same time, a negative assent is given to their particular hallucination, is sometimes more effective than punishment. An interesting instance of this kind is related by the late Dr. Rush, of a lunatic in the Pennsylvania Hospital. This patient having frequently attempted to set fire to the building, was expostulated with by one of the managers, who endeavored to impress upon his mind the effects of a conflagration, such as he had attempted. "But, I am a salamander," said he. "*Recollect, however,*" answered the gentleman expostulating with him, "*that all the patients in the hospital are not salamanders.*" This sagacious reply had the desired effect; the patient desisted from his incendiary attempts.

XIII. HANWELL ASYLUM, NEAR LONDON, ENG.

Extracts from Doctor Pliny Earle's Visit to thirteen Asylums for the Insane in Europe, 1841.

THE MIDDLESEX COUNTY LUNATIC ASYLUM, ENGLAND.

The Lunatic Asylum for the paupers of the county of Middlesex, Eng., is the largest institution of the kind in Great Britain. It is located at Hanwell, a few miles from London. It went into operation in 1831, and now, 1841, has accommodations for 850 patients.

The cooking and the heating of the apartments, throughout the whole establishment, are performed by steam. The length of pipes for the last purpose, is upwards of one and a half miles. The house is lighted by gas.

A quart of strong beer, *per diem*, is allowed to each of the patients that labor, and a pint to each of the others.

One of the most prominent characteristics in the internal economy of this institution, is the amount of labor performed by the inmates. But few asylums of the kind can furnish so great a per centage of patients devoted to useful occupations. Of the *six hundred* who were there in 1837, more than *four hundred* were thus employed. Most of these were incurables. The cooking for all the residents at the asylum, the brewing, washing, tailoring, shoemaking, and gasmaking, are all performed by the patients, there being in each department, a sane person who acts as overseer. Carpentering, cabinet-making, the manufacture of straw hats and bonnets, the spinning of twine, basket-making, and picking, carding, and spinning wool for mops, are also carried on to no inconsiderable extent. Many of the patients are employed in horticulture and other labor in the open air. In one year six of the patients were taught the art of shoemaking. No accident has hitherto occurred from trusting edged and other dangerous tools, in the hands of the employed.

"On entering the gate," says Harriet Martineau, in describing her visit to this asylum, "I met a patient going to his garden work, with his tools in his hand; and passed three others breaking clods with their forks, and keeping near each other for the sake of being sociable. Further on were three women rolling the grass in company; one of whom, a merry creature, who clapped her hands at the sight of visitors, had been *chained to her bed for seven years* before she was brought hither, but is likely to give little further trouble henceforth, than that of finding

enough for her to do. A very little suffices for the happiness of one on whom seven years of gratuitous misery have been inflicted: a promise from Mrs. Ellis to shake hands with her, when she has washed her hands; a summons to assist in carrying dinner; a permission to help to beautify the garden, are enough. Further on, is another in a quieter state of content, always calling to mind the strawberries and cream Mrs. Ellis set before the inmates on the lawn last year, and persuading herself that the strawberries could not grow, nor the garden get on, without her, and fiddle-fadling in the sunshine to her own satisfaction, and that of her guardians. This woman had been *in a strait waistcoat for ten years* before she went to Hanwell. In a shed in the garden, sit three or four patients cutting potatoes for seed, singing and amusing each other; while Thomas, a mild, contented looking patient, passes by with Mrs. Ellis's clogs, which he stoops to tie on with all possible politeness; finding it much pleasanter, as Dr. Ellis says, 'to wait on a lady, than be chained in a cell.' In the bakehouse, meanwhile, are a company of patients kneading their dough; and in the wash-house and laundry, many more equally busy, who would be tearing their clothes to pieces if there was not the mangle to be turned, and a prodigious array of linen in the drying closet to be ironed. A story higher are coteries of straw-plaiters, and basket-makers, and knitters among the women, and saddlers, shoemakers and tailors, among the men."*

A chapel is connected with the institution, where a portion of the patients assemble at a weekly service, and at morning and evening prayers. Those patients who leave the asylum destitute of pecuniary means are, by a beneficent provision of the government of the institution, so far assisted as to enable them to supply their wants, until they can obtain a situation wherein to gain a subsistence.

Sir W. C. Ellis, who, in 1837, and for several years previously, had fulfilled the duties of superintendent of this asylum, has published a work upon insanity, from which the following anecdote is extracted. It proves that he is gifted with a presence of mind, and a sagacity adapted to any emergency, and worthy of the man who has received the distinguished honor of knighthood, in consideration of his skill in the management of the insane.

A workman at the Wakefield Lunatic Asylum left a chisel more than three feet long in one of the wards; a furious patient seized it and threatened to kill any one who approached him. Every one then in the ward immediately retreated from it. "At length," says the author referred to, "I opened the door, and, balancing the key of the ward on my hand, walked slowly towards him, looking intently at it. His attention was immediately attracted; he came towards me, and inquired what I was doing. I told him I was trying to balance the key, and said, at the same time, that he could not balance the chisel in the same way on the back of his hand. He immediately placed it there, and extending his hand with the chisel on it, I took it off very

* Miscellanies, by Harriet Martineau. Boston edition, Vol. i. p. 231, 232.

quietly, and without making any comment upon it. Though he seemed a little chagrined at having lost his weapon, he made no attempt to regain it, and, in a short time, the irritation passed away."

This accomplished physician, (Sir William C. Ellis,) is now (1840) deceased, and the asylum is under the superintendence of Dr. Conolly the author of a valuable treatise upon insanity.

XIV. ASYLUMS IN EGYPT AND TURKEY.

The two articles which follow, describing an Egyptian and a Turkish Asylum, are taken from a recent work published by Dr. Pliny Earll, resident physician of the Friends' Asylum, near Philadelphia. They present a sad contrast to the well conducted Asylums of Europe and the United States.

(1.) ASYLUM AT GRAND CAIRO, EGYPT.

The following interesting account of a visit to this Asylum is from Dr. Madden's "Travels in Turkey."

"I believe that no eye hath witnessed, elsewhere, such a melancholy spectacle as this place affords. The keeper made many objections to my admission; he said no Frank was suffered to go in, but the name of the *hakkin* of the English Consul, and the sight of half a dozen piastres to boot, removed his scruples.

"I was led from one passage to another, door after door was unbarred, the keeper armed himself with a *courbash*, a whip made of one solid hippopotamus, and we at length got into an open court, round which the dungeons of the lunatics were situated. Some who were not violent were walking, unfettered; but the poor wretches in the cells were chained, by the neck, to the bars of the grated windows. The keeper went round, as he would in a menagerie of wild beasts, rattling the chain at the window, to rouse the inmates, and dragging them by it when they were tardy in approaching. One madman, who spat at me as I passed his cell, I saw the keeper pull by his chain, and knock his head against the bars till the blood issued from his nose. I forced him to desist. Each of them, as we passed, called out for food. I inquired about their allowance, and, to my horror, I heard that there was none except what charitable people were pleased to afford, from day to day. It was now noon, and they had no food from the preceding morning. Two well dressed Turkish women brought in, while I was there, a large water mallow and two cakes of bread; this was broken in pieces and thrown to the famished creatures. I never saw nature subdued to such lowliness. They devoured what they got like hungry tigers, some of them thrusting their tongues through the bars, others screaming for more bread. I sent for a few piastres worth of bread, dates, and sour milk; its arrival was hailed with a yell of extacy that pierced the very soul. I thought that they would have torn down the iron bars to get at the provisions; and in spite of the *courbash* their eagerness to get their portions rendered it a difficult matter to get our hands out of their clutches. It was humiliating to humanity to see these poor wretches tearing their food with their filthy fingers. Some of their nails were so long as to resemble the talons of a hawk.

"And can such be the condition of 'man, so noble in reason, so infinite in faculties, in form and movement so express and amiable!' Vain boast! Go, paint the faculties of this 'paragon of animals' in the dungeons I have described; and when you have studied the institutions of the Turk, sit down, if you can, with an exalted opinion of human nature.

"There was one thing that I could not help remarking: the ruling passion of the Mahometan, as preserved even in insanity. One man, who begged me to give him bread, spat upon me when he got it; another, with all the eagerness of famine, abstained from eating it; hungry as he was, he preferred flinging the portion of melon he had just received at a Christian's head, rather than satisfy his craving stomach. He concealed his missile for nearly a quarter of an hour, till I was opposite his window, he then thrust his naked arm through the bars and took deliberate aim at me. In spite of my entreaties he got the courbash around his uncovered shoulders. But there was one old man who moved not while the food was distributing; and as I looked into his cell, destitute of every thing, with neither straw nor rug, I could barely distinguish an emaciated form lying on the bare earth, with hardly a rag upon his body. He could not lie down altogether, for he was chained by the neck to the window. He was worn to a skeleton; and whether it was the pressure of the chain that impeded respiration, or not, I cannot say, but his stentorious breathing resembled that of a person in the last convulsions; and, on inquiry, I found this wretched creature to be actually dying. The smell of the apartment was horrible. I had some difficulty to prevail on the keeper to take off his chain; I gave some piastres to buy straw, and some days afterwards sent the janizary to inquire after the poor wretch—he was dead, and there was no straw to be seen in his dungeon.

"I observed a very decent looking Turk in one of the cells, who had been an officer in the pasha's troops. He complained bitterly of hard usage, and said he was famished; some days he had only five paras' worth of bread, or a half-penny's worth, and he talked altogether so rationally of his condition, that I expressed my wonder to the keeper that he was not permitted to go abroad. The keeper laughed at my ignorance. 'You don't know,' said he, 'that when mad people appear most quiet they are always plotting mischief.' He illustrated his assertion by a story which, if credible, certainly showed the necessity of confining lunatics, however mild in their appearance, to their cells at night.

"A black man, who followed the trade of a butcher, had been confined there many years ago; he had been allowed the range of the house, with two or three others whose derangement was attended with no violence. One night the black butcher secreted a knife; he induced another man to enter his cell, prevailed on him to lie down, and then cut his throat; he calmly cut him in quarters, and distributed the joints around his cell, as he was in the habit of arranging his meat in his shop. He solicited the custom of his comrades, and to those who were chained, he carried such portions as they desired. The keeper was disturbed by the cannibal rejoicings; it was the first full meal they

had had for many a long day. On examining the cells, he found one man missing. He asked the black butcher if he had seen him, and he replied that he had sold the last joint of him. 'Since that time,' said the keeper, 'we look out better, otherwise they would eat one every day.'

"I endeavoured to ascertain the cause of the madness of the present inmates. They were thirteen in number, and all males. Four of them had gone mad from smoking *hachis*, an intoxicating drug, composed of the small pistils of the flax plant; five of them had had poison administered to them; three were religious monomaniac fanatics, and one had gone mad after being bastinadoed.

(2.) ASYLUM AT CONSTANTINOPLE, IN TURKEY.

Connected with some of the mosques in Constantinople, there are buildings for the reception of the sick—a kind of hospital, in which the poor who are suffering under disease may have their wants ministered to by the hand of charity. That which is adjacent to Sulimanyé, or the mosque of Suliman, is devoted exclusively to the insane. There, none but men are admitted; the women, according to the Turkish custom, as well as in conformity with the precepts of the religion of Mahomet, being kept in private seclusion. The building is but one story in height, and like the cloisters of many gothic cathedrals, and the khans or caravanseras of Turkey and Natolia, completely surrounds a central court. The entrances to all the rooms are beneath the corridor, at which the court, upon all sides, is limited.

I visited this asylum during the feast of the Bairam, near the close of the year 1838, in company with two American gentlemen, residents at Constantinople. We entered the court, passing several miserably clad people "sitting at the gate," not "to ask alms," but to receive it, if voluntarily offered. Within the court were many people, mostly young men and boys, who had come either for the gratification of curiosity, or to administer to the wants of the afflicted. We passed along the corridor to the first window. From between the bars of the iron grating with which this was defended, a heavy chain, ominous of the sad reality within, protruded, and was fastened to the external surface of the wall. It was about six feet in length. The opposite extremity was attached to a heavy iron ring, surrounding the neck of a patient who was sitting, within the grating, upon the window seat. We entered the room and found two other patients, similarly fastened, at the two windows upon the opposite side of the room. It was a most cheerless apartment. A jug to contain water, and for each of the patients, a few boards laid upon the floor, or elevated three or four inches, at most, and covered with a couple of blankets, were all the articles of comfort or convenience with which, aside from their clothing, these miserable creatures were supplied. Although in the latter part of December, they had no fire, nor were the windows glazed, but close shutters attached to each, rendered it possible measurably to shield the inmates from severe weather whenever it might occur. The length of the chain of each patient is barely sufficient to

enable him to lie down upon his comfortless bed of boards and blankets. Leaving this apartment, we proceeded successively to the others, twelve or fifteen in number, in all of which we found the patients in a very similar condition to those whom we had first seen. There was but one who was not chained. He was an elderly man, though still retaining much of the vivacity of earlier years. His long and profuse hair and beard nearly white, and his complexion very delicate. He was formerly a priest of the Islam faith. He has been deranged and confined in this place nearly fifteen years, during which time he has thrice broken the chain with which he was secured. He is now alone in his apartment, within which no one is permitted to enter. He talked and raved incessantly, threatening to kill those who were making him their gazing stock. Like those in the apartment first mentioned, all the patients, with one exception, were without fire. The person forming this exception was one of the most hideous of undeformed human beings. He has been in the *Timar-hané*, as this asylum is called by the Turks, more than forty years. His hair and beard, both naturally abundant, curly and black as ebony, appeared as if they had not been cut or combed since his entrance. They nearly concealed his face, and the former hung in a profusion of literally "dishevelled locks" about his neck and shoulders. His head would have been a *nonpareil* for an original to the figure of Cain, in David's celebrated picture of "Cain meditating the death of Abel." He lay crouched upon all-fours, resting upon his knees and elbows, and holding his head and hand over a *manghale* of living embers. Whatsoever was said, whether addressed to him or otherwise, could only induce him slowly to turn his huge head, and present his hideous face more directly to view. His case was a striking example of dementia.

The patients, generally, appeared to enjoy pretty good health, aside from the lesion producing insanity. I was informed that a physician attends them regularly. There is a person who has the charge of supplying them with food, and they receive considerable attention from those who visit them. While we were there, many visitors were conversing with them, giving them articles of food, money and tobacco, and doing them a kind office by filling and lighting their "chebouks." These patients present a diversity of species of insanity, and a variety of hallucinations. One of them was seated against the bars of his window, cross-legged, and with arms folded upon his breast, in all the counterfeited dignity of a sovereign, and the imperturbable gravity of a saint. It was evident by his demeanor that he esteemed himself one of the rulers of the earth—a Mahmoud, a Mahomet, or a Great Mogul. Upon being informed that I was an American, "Please," said he, turning towards me slowly, and without the slightest change of countenance, "please, effendi, to give my respects to the Sultan of America." This said, he assumed his former position, and maintained it with the most scrupulous exactitude.

There was another, one of the finest looking Mussulmen that ever worshipped before the altars of Stamboul. His beard might acknowledge no rival in beauty, except that of Mahmoud the Second, and his eye possessed all the mingled fire and softness of the Orient. He was

occupied in sewing. He was surrounded by several young Turks, but continued his labor regardless of any of those who were present. The gentleman of our party who speaks the Turkish language, addressed him, and at length won him, although with considerable reluctance on his part, into conversation. I have never witnessed a greater blandness and suavity of manners than in him. Upon being asked the cause for which he had come to that place, "Please, gentlemen," said he, "to be seated, and I will relate the whole history." Inasmuch as the uncovered stone floor presented an aspect rather uninviting, as a seat, we excused ourselves, and he was requested to proceed. Thereupon he placed himself in an attitude worthy of the orators of antiquity, and related a long story, in a most amusing but graceful manner. The whole substance of it was, that people began by calling him a fool; and, going from bad to worse, at length ended by bringing him to the Timar-hané of Suliman-yé.

Such, then, is the gloomy picture with which these sketches of some of the asylums for suffering humanity are brought to a conclusion. It presents us with an additional motive for hoping that the stream of knowledge, which, taking its rise in Chaldea, has flowed to us, constantly augmented in its course, through Egypt, Greece, Rome, and the nations of western Europe, may reverse its course, or release a branch, once more to fertilize the desolate regions of intellect throughout the East. It is a proposition, the truth of which cannot, perhaps, be questioned, that, in proportion as a nation advances in intellectual cultivation, its practical benevolence assumes a loftier standard. When then, the light of science shall gild with brighter rays the empire of the Ottoman, we doubt not that the chains of the maniac will be broken, and his condition rendered such as to leave a hope, that alienated reason may resume her proper throne.

It is difficult to reconcile the treatment of the patients in the "Timar-hané," with the testimony of physicians in regard to the attention paid to unconfined lunatics in Turkey, and with the prevalent opinion among the followers of Mahomet, that the insane are the especial favorites of Heaven—that their "discord" is

"Harmony not understood;"

that their language appears to us to be incoherent and unmeaning, merely because the minds of the sane are not sufficiently spiritualized to comprehend it. Dr. Millengen, an English physician, who had practised nearly twenty years in Constantinople, informed me that he had known the wandering lunatic to be received by strangers, and, for weeks in succession, receive all the kindness of the most cordial hospitality.

XV. INSANITY CURABLE:

ESPECIALLY IF SENT TO SYLUMS, IMMEDIATELY AFTER THE
DISEASE APPEARS.

“The opinions which have hitherto prevailed (on account of the insane being treated as scarcely belonging to the human family) in regard to the incurability of the disease, reports of hospitals prove erroneous. They show that, although the disease becomes more hopeless in proportion to the length of its continuance, yet that, *of patients received within three months after the first attack, the proportion recovered is more than 90 per cent.* These reports show that, in recent cases of insanity, as large a proportion of recoveries will take place, as from any other acute disease of equal severity.

“Insanity is a disorder ensuing from derangement of the functions of the brain and nerves, and requires not only moral, but medical treatment, as much as almost any other physical disease. But it is so obscure in its nature, and untoward in its manifestations, that the great mass of medical practitioners, considering that the patients should be immediately sent to an asylum, do not study it with that care and attention, which are expended on the common diseases of routine practice. The degrees of derangement, however, are so infinite, that, in the largest receptacle of lunatics, no two inmates have ever been discovered, who were in all respects similarly crazed; and, therefore, insanity can only be thoroughly understood in its ten thousand modifications of aspect, by being seen and studied in them all. The insane, therefore, if submitted to the care of physicians who have seen but few cases, and paid but little attention to the subject, cannot have a fair chance of cure, especially when the moral means necessary cannot be had. The few recoveries out of an asylum are therefore no index of what might be done under judicious treatment. But, *to prove the curability of the disease*, the committee would refer to the following authenticated statistical facts from the reports of hospitals:

“In the York Retreat, of 47 patients admitted, 40 were restored; and of the remaining 7, three died of other complaints, under which they labored at admission. Dr. Willis, in his evidence before the committee of Parliament in 1789, averred that 9 cases out of 10 of insanity recovered, if placed under his care within three months from the attack. Dr. Burrows stated, in 1820, that, of recent cases under his care, 91 out of 100 recovered; and in 1828, he adds, that the subsequent annual reports of various lunatic institutions, and his own wider field of observation, confirmed that statement. In the Saléprière at Paris, the proportion of cures, of recent cases, was, in 1806-7, according to Dr. Carter,

almost as high as that of Dr. Willis. Dr. Ellis, director of the York West Riding Lunatic Asylum, England, stated, in 1827, that, of 312 patients admitted within three months after their first attack, 216 recovered. Reports from several asylums in Europe show that, in cases of not more than one year's standing, the recoveries have been 70 per cent, while in those of 3 or 4 months' duration, relief has almost invariably been the result of the reception into the institutions. Instances are not unfrequent, where individuals inveterately and apparently incurably afflicted, have been recovered at these asylums. By the tables of all the principal hospitals in France, England and the United States, it appears, that notwithstanding many of the patients may have died within a period too short after their reception, for the application of medical and moral means to produce their full effects, yet, of the 43,629 cases reported, 15,729 were cured, being more than 41 per cent of the whole number admitted; to which might be added the partial cure of many, and a general improvement in the condition of the remainder; this, too, while there have been received persons of every age, every difficulty of cure, laboring under insanity of every degree of severity and every length of continuance. The happiest results have attended the remedial measures adopted at hospitals in this country, not only in effecting cures in most cases, especially of the recent ones, but also in improving, calming, and rendering more comfortable all. One of the insane inmates of the Worcester asylum, when asked whether he preferred his present situation to his former, replied, 'O, that was *hell*, but this is *heaven*?' At the Bloomingdale asylum, N. Y., of 581 recent cases, 341 were discharged cured; and at the Connecticut Retreat, during the first 5 years, of 97 recent cases, 86 were cured. At the Hudson Lunatic Asylum, N. Y., of the 66 cases treated during the year 1833, 18 recovered, 6 much improved, 21 improved, 11 stationary, 3 died, 5 intemperate reformed, 1 do. unreformed, 1 opium-eater reformed."

XVI. LUNATICS IN JAILS,

HOPELESS AND WRETCHED.

(1.) *Extracts from the Report of the Commissioners of the Massachusetts Lunatic Hospital, to His Excellency the Governor, 1832.*

"It is now more than thirty years since the laws of this Commonwealth have authorized their commitment to prison, whenever their being at large should, in the opinion of two magistrates, be judged 'dangerous to the peace or safety of the good people.' It is a well authenticated fact, that those upon whom the first attack of insanity is most violent, and who are therefore more liable, from the vehemence of its assaults, to commit outrages upon the persons or property of others, are most easily cured. Our laws, therefore, by authorizing their confinement, whenever in the throes and paroxysms of their malady, they may have threatened aggression or excited alarm, have at once removed the most hopeful cases beyond the reach of recovery. It may be emphatically repeated, *beyond the reach of recovery*, for, from all the inquiries made by the commissioners upon this subject, they have *never heard of more than three or four instances of restoration*, among all those who have been subjected to the rigors of a confinement in jails, and houses of correction; while well regulated institutions for the reception and appropriate treatment of the insane, have returned fifty, sixty, and in some instances, ninety per cent of recoveries. To him, whose mind is alienated, a prison is a tomb, and within its walls he must suffer as one who awakes to life in the solitude of the grave. Existence and the capacity of pain are alone left him. From every former source of pleasure or contentment, he is violently sequestered. Every former habit is abruptly broken off. No medical skill seconds the efforts of nature for his recovery, or breaks the strength of pain, when it seizes him with convulsive grasp. No friends relieve each other in solacing the weariness of protracted disease. No assiduous affection guards the avenues of approaching disquietude. He is alike removed from [all the occupations of health, and from all the attentions, everywhere but within his homeless abode, bestowed upon sickness. The solitary cell, the noisome atmosphere, the unmitigated cold, and the untempered heat, are of themselves sufficient soon to derange every vital function of the body, and this only aggravates the derangement of his mind. On every side is raised up an insurmountable barrier against his recovery. Cut off from all the charities of life, endued with quickened sensibilities to pain, and perpetually stung by annoyances, which though individually small, rise by constant accumulation to agonies almost beyond the power

of mortal sufferance ; if his exiled mind in its devious wanderings ever approach the light by which it was once cheered and directed, it seems every thing unwelcome, every thing repulsive and hostile, and is driven away into returnless banishment.

“From the absence of suitable institutions amongst us, the insane have been visited with a heavier doom than that inflicted upon the voluntary contemnors of the law. They have been condemned as no criminal ever was condemned, and have suffered as no criminal ever has suffered. The code by which they have been judged, denounces against them the penalties due only to crime, while it is unmitigated by any of those merciful provisions which, in our penal code, attemper justice with humanity. Even where a criminal stands convicted of perpetrating the most atrocious crime, the benignity of the law accompanies him to the solitude where he is to expiate his offence. He is comfortably clad and warmed and fed at the expense of the State which inflicts his punishment. He is supplied with the means of moral renovation, and when those proofs of penitence and reformation are given, which it is in his power to furnish, the laws relent and authorize the remission of his sentence. But though the insane have been made fellow prisoners with the criminal, they have suffered the absolute privation of every comfort for the body and every solace for the mind. Yet why should a man be treated even as a criminal, who, by universal consent, is incapable of crime? We understand what is signified by retributions for guilt, but to speak of retributions for insanity, does violence to every feeling of humanity and dictate of conscience. Yet this wretched class of our fellow beings, whose only offence is what others justly regard as among the direst of calamities, as incapable of moral guilt as unhappily they are of moral consolation, have been regarded by our laws as though they were rather the objects of vengeance than of commiseration. And were a system now to be devised, whose express object it should be to drive every victim of insanity beyond the limits of hope, it would scarcely be within the power of a perverse ingenuity to suggest one more infallible than that, which for so many years, has been in practical operation amongst us. That system could advance one paramount claim to preference. Its experiments have been numerous, and have scarcely ever failed in rendering the most favorable cases of insanity utterly incurable. This practice reacts upon the community by which it is sanctioned. To say nothing of the amount of human suffering it has caused, it cannot be doubted that, with appropriate treatment, one half at least of all the lunatics, whose support must now continue to be a burden upon the State while they live, might have been restored, and this half might have added as much to the resources of the State, as the other would have subtracted from them.”

We quote a few FACTS, from the “Second Report of the Prison Discipline Society, Boston.”

“In Massachusetts, by an examination made with care, about 30 lunatics were found in prison. In one prison were found 3, in another 5, in another 6, in another 10. Of these last mentioned, one was found in an apartment in which he had been *nine years* ! He had a wreath of rags round his body, and another round his neck. This was all his

clothing. He had no chair, bench or bed. A heap of filthy straw, like the nest of swine was in the corner. Connected with his wretched apartment was a dark dungeon, having no orifice for the admission of light, heat or air, except the iron door, about $2\frac{1}{2}$ feet square, opening into it from the prison. The other lunatics in the same prison were scattered about in different apartments, with thieves and murderers, and persons under arrest, but not yet convicted of guilt."

"In the prison of the 5 lunatics, they were confined in separate cells, which were almost dark dungeons. They too were laid on old, dirty straw, and their garments were filthy. The ventilation was so incomplete, and the air so foetid, that more than one of the visitors experienced nausea, and almost vomiting."

"In the prison where the 6 were, their condition was less wretched. But they were sometimes an annoyance, and sometimes a sport to the convicts: the apartment in which the females were confined, opened into the yard of the men, and much profanity and obscenity were interchanged."

"In the prison, or house of correction, so called, in which were 10 lunatics, two were found about about 70 years old, a man and a woman, in the same apartment of an upper story. The female was lying on a heap of straw, under a broken window. The snow in a severe storm was beating through the window, and lay upon the straw around her withered body, which was partly covered with a few filthy and tattered garments. The man was lying in a corner of the room in a similar situation except that he was less exposed to the storm. The former had been in this apartment 6, and the latter 21 years."

"Another lunatic in the same prison, was found in a plank apartment of the first story, where he had been 8 years, without leaving the room but twice. The door had not been opened in 18 months. The food was furnished through a hole in the door. The room was warmed by no fire; but still the woman of the house, said '*he had never froze.*' As he was seen through the orifice in the door, the first question was, is that a human being? The hair was gone from one side of his head and his eyes were like balls of fire."

"In the cellar of the same prison were 5 lunatics. The windows of this cellar were no defence against the storm; and, as might be supposed, the woman of the house said, '*we have a sight to do to keep them from freezing.*' There was no fire in this cellar that could be felt by 4 of the lunatics. One of the 5 had a little fire of turf in an apartment of the cellar by herself; she was, however, infuriate if any one came near her. This woman was committed to this cellar 17 years ago. The apartments were about 6 by 8 feet, made of coarse plank, with a hole in the door of 6 inches by 4. The darkness was such in two of these apartments, that nothing could be seen by looking through the orifice in the door; at the same time, there was a poor lunatic in each. A man who had grown old was committed to one of them in 1810, and had lived in it 17 years. An emaciated female was found in another dark apartment, without fire, and almost without covering, where she had been nearly 2 years. A colored woman in another where she had been 6 years; and a miserable man in another, where he had been 4 years."

XVII. IMPORTANT TRUTHS AND GENERAL PRINCIPLES RESPECTING THE INSANE.

[*From the 15th report of the Prison Discipline Society ; Boston, 1840.*]

(1.) *Important Principles adopted by the Superintendents of Insane Asylums in the treatment of the Insane.*

The superintendent of the Vermont Asylum says :

"As soon as a patient manifests any return of reason, his liberties are increased, and he is encouraged to exercise his judgment and self-control, by joining in the employments and amusements of the convalescents, by associating with them and the officers, and having, as far as is practicable, the privileges of an ordinary boarder at a public boarding house. To retain this confidence, the patient endeavors to control his disordered feelings, and frequently succeeds in regaining the lost balance of his mind. Those who have sufficiently improved, walk about unaccompanied by any one, visit the different places in the village, and, in a word, are their own keepers. They rarely abuse the confidence thus placed in them, and frequently assist the farmer and attendants in watching those who require it."—*Third Report*, p. 19.

The superintendent of the McLean Asylum at Charlestown, says :

"The value of properly adapted architectural arrangements ; of a complete classification of patients ; of a numerous, well educated, morally elevated and well compensated class of assistants ; of well directed and perseveringly applied employment ; of mechanical and agricultural labor ; of such amusements and exercises of mind and body as experience proves best adapted to occupy and divert the diseased intellectual functions and moral susceptibilities ; and lastly, such an intercommunication with the sane in social intercourse, public and private devotion, and in the lighter and gayer reunions of life, as the peculiarities of each case demand—must be felt and acknowledged, whenever the insane are intrusted to the care of the refined, the well informed and the conscientious. Beyond the judicious, energetic and experienced application of such moral appliances as these, and an adequate medical treatment, there is, and can be, no magic or mystery in ministering to the mind diseased."—*22d Report*, p. 10.

The superintendent of the Ohio Lunatic Asylum says, in regard to their patients :

"Time, neglect, and bad treatment, in the jails, poor houses, and private dungeons of the country, have, in a great measure, established the nature of their complaints, and confirmed the frightful delusions that rage in the brain. We have washed them, provided them with food and clothing, and, as far as possible, exerted ourselves to make

them feel comfortable in their new situation. Their '*chaos of illusions*' has been attentively studied, and we have endeavored to classify them, and, through a mild system of tender respect and philosophic kindness, bring them to submit to the regulations of an efficient moral discipline. * * * * * Comparatively, it would have been an easy task for us to have turned the strong key, and contented ourselves with making them secure; but we felt better, and knew that a benevolent, high minded, and active community required and expected more. Our heart and hand were in the cause; and, with a humble reliance upon the aid of Divine Providence, we have ventured to throw open the doors of this noble State institution to the poor and needy, the unfortunate and afflicted, and in some measure to begin the work as a great moral enterprise, upon the principles of Christian charity, and according to the active, liberal and commendable spirit of the times in which we live."—*Second Annual Report*, p. 19.

The superintendent of the Western Lunatic Asylum in Virginia, says :

"In this institution, nothing which bears the least resemblance to coercion is ever permitted; for experience and humanity has taught us the greater efficacy of milder means. The most tender method we have found almost invariably to produce the best effect; and hence, of course, it is adopted. No resentment, or return of injury, ever is allowed; and any thing like severity on the part of either officer or attendant, towards a patient, would doubtless be punished, by its humane and enlightened directors, with instant banishment from the premises. We allow each patient the latitude of personal liberty consistent with his safety, and no restraint is ever imposed, except what is rendered absolutely necessary. The only means used of effecting it, is the muff, strait waistcoat, and large chair. During the last year, these have been resorted to in but very few instances; and, at the time I write, not a single individual, out of about seventy, is trammelled by either of them."—*Annual Report*, p. 23.

(2.) *Value and importance of good Assistants in Insane Asylums.*

The superintendent of the Hospital at Worcester says :

"No persons are employed about the hospital, but such as bring testimonials of good moral character, of strict temperance, of faithfulness, and who are experienced in business.

"There are no servants or domestics in the establishment; we are one family; all are responsible in a particular department, and feel an interest in performing their duty to their own satisfaction, and to the acceptance of those who are ultimately responsible. The business of the hospital is conducted quietly and easily; every individual knows what to do, and how to do all that is required. They make a community of intelligent, agreeable associates, and feel little inclination to go abroad for society. No boisterous or unbecoming language is ever heard from them; no loud calling, laughter, or unsocial treatment, ever disturbs the quiet of our family.

"In thus bearing testimony to the capacity and intelligence of all

who have a duty to perform at the hospital, I feel that I am not overstepping the boundaries of propriety, and I am sure I am saying nothing that is not right and just.”—*Seventh Report*, p. 90.

The superintendent of the McLean Asylum says—

“The importance of securing the services of an elevated, respectable and cultivated class of persons, for the responsible duty of attending upon the insane, was early recognized in this institution, and it always has been deemed an object, to obtain which no trouble or cost was to be spared. We never employ those in whom we would not place implicit confidence.”—*Twenty-second Report*, p. 22.

(3.) *Importance of removing the Insane to an Asylum, and separating them from their friends at home.*

The superintendent of the Vermont Asylum, Dr. Rockwell, says :

“It is almost indispensable for success, in the treatment of the insane, that they be removed from their homes and their relations. It is very frequently the case, that an insane person conceives a dislike, and sometimes complete hatred, towards those he formerly loved. When this occurs, the watchful solicitude of friends, and their tender and constant assiduities, not only do not promote his comfort, but greatly aggravate his disease, and increase his enmity towards them. It is therefore the greatest kindness they can bestow upon the unfortunate sufferer, to remove him from those scenes of excitement and irritation.”—*Third Report*, p. 20.

The superintendent of the Asylum at Worcester, Dr. Woodward, says :

“Unlike all other human sufferers, the insane, who most need the care and sympathy of friends, spurn them from their presence, shun their society, and reject, with passion and scorn, every effort from their hands which is designed for their benefit and the amelioration of their condition.

“To afford a chance of cure, in old and long established cases, they must be taken from their homes, and from old associations, and placed in the care of strangers, in institutions designed for their benefit, before one ray of light can penetrate the dark recesses of the long benighted intellect, or one spark of comfort warm and animate their cold and deadened feelings.”—*Seventh Report*, p. 65.

The superintendent of the Western Lunatic Asylum, in Virginia, says :

“There is no general maxim in the treatment of insanity, wherein medical authors and practitioners are so unanimous, as that of separating the patient from all customary associations, his family, and his home. Few persons, when they become insane, acknowledge being so ; consequently, when they find themselves placed under restraint in their own houses, denied intercourse with their families, and their orders not only disobeyed, but themselves controlled by their own servants, they are naturally infuriated to a high degree, or imbibe a plausible and strong suspicion, that a conspiracy is formed against their life, liberty and property. In all such cases, requiring watchfulness or con-

trol, the feelings of the patient are less outraged at restraints imposed upon him by strangers, over whom he never exercised any authority, than by those on whose consideration he is conscious of possessing stronger claims, or whose sympathies he may hope to rouse by continued and persevering appeals to their kindness and former friendship. It often happens that maniacs, who, whilst in the bosom of their families, are turbulent and outrageous, as soon as they are taken charge of by strangers, become at once peaceable and tranquil. So that, whether we look at the cure or the comfort of the patient, it is certainly an act of kindness to remove him from the influence of incessant irritation, and place him where the temptation to excitement is diminished, and its room supplied by whatever can soothe and tranquillize.

"In most instances, the mental disease has taken gradual root amid the associations of home; and the morbid ideas have connected themselves inseparably with the patient's family and friends. Those formerly most loved become often the objects of hatred and suspicion, and their presence tends greatly to provoke the disorder. The very walls of the house, the scenery by which it is surrounded, in short, every thing capable, by its connection with the past, of exciting an interest in his mind, increases his morbid associations, and retards the return of health and reason. And, in such cases, can it be doubted, that a change of scenes and society, and the well conducted kindness and care of those whose duty it is thus to manage the inmates of an asylum, would not only benefit his general state, but prepare him also for the ameliorating operation of both medical and moral treatment?"—*Report*, pp. 28 and 29.

(4.) *Importance of removing the Insane to an Asylum in the first stages of the disease.*

In the Vermont Asylum, at Brattleboro', during the last year,

"Of the recent cases discharged, 20 have recovered, making the percentage of recoveries in recent cases nearly 91. Of the chronic cases discharged, only 5 were recovered, making a percentage of recoveries in chronic cases only $31\frac{1}{2}$."

"It will be seen, therefore," say the trustees, "that a far greater proportion of recent cases have recovered than chronic cases. Persons who are interested for those who are afflicted with insanity, should endeavor to have them removed to a public asylum, as soon as convenient after the attack of the disease."—*Third Report*, pp. 11 and 12.

In the State Lunatic Hospital at Worcester,

"Of those which were discharged as restored from insanity, 64 were recent cases, giving $90\frac{1}{2}$ per cent on the discharges and deaths of recent cases; and 16 were old cases, giving $16\frac{1}{2}$ per cent on the discharges and deaths of old cases."—*Seventh Report*, pp. 10 and 11.

Dr. Woodward says:

"418 cases are recorded as having been admitted before insanity had continued *one year*. Of this number, 370 have recovered, 48 have failed to recover."

Of "161 cases of duration from one to two years, 96 have recovered, and 64 have failed to recover."

Of "411 cases in which the disease has existed more than two years, only 72 have recovered."

Of "247 who had been insane over five years, only 19 recovered." *Seventh Report*, pp. 78 and 78.

The superintendent of the McLean Asylum, Dr. Bell, says :

"The extraordinary proportion of recoveries in this institution, for several years past, is based on the fact that, since the movements of the Commonwealth to provide for the pauper insane were felt, our community is well advised of the importance of early subjection to the treatment of a proper asylum ; and it is probable that almost every case occurring with decided manifestations, in every grade of social position, is promptly submitted to treatment in one of our public institutions.

"Formerly, among those of a particular walk in society, many expedients were resorted to, such as sending the sufferer to travel, or on a sea voyage, boarding him with some medical or other person in the country, and the like, which attempts were too apt to absorb the curable stage of disease, and when the experiments were completed, the patient, as a last resort, was sent here to linger out as an incurable, his sacrificed existence."—*Twenty-second Report*, p. 11.

At Dr. White's Private Asylum, at Hudson, N. Y., of 20 recent cases last year, 15 recovered ; while, of 30 chronic cases, only 9 recovered.

In the Ohio Lunatic Asylum, at Columbus, the directors say :

"The importance of early admission into the asylum, cannot be too strongly impressed upon the public mind. The fact long since established in other institutions, has been confirmed by the experience of this, that the proportion of cases cured, other circumstances being equal, is in the inverse ratio of the time of their duration. The more recent the case, the more ready and perfect the cure ; and the longer, the contrary."—*Second Annual Report*, p. 5.

In the Western Lunatic Asylum of Virginia, at Staunton, the superintendent, Dr. Stribling, says :

"30 were placed in the institution within 12 months of the date of their attack, and of this number 25 have been restored." "More than 83 per cent, of all recent cases have been cured, and only 43 per cent of all cases."—*Annual Report*, p. 14.

(5.) *Value and importance of useful labor to the insane.*

The superintendent of the Vermont Asylum says :

"Another year's experience has confirmed our former opinion, that useful employment, in the open air, affords the best moral means for the restoration of many of our patients. Our farm and garden afford the patients abundant opportunities for exercise and occupation, and

for carrying into a still more successful operation those moral means which have hitherto proved so efficacious in restoring the lost reason. The original design of making this institution a self-supporting establishment, is now in some measure carried into successful operation ; and we trust the time is not far distant, when the insane poor can be supported cheaper at this asylum than at their several alms houses."

—*Third Report*, p. 21.

The superintendent of the Hospital at Worcester says :

"Of the benefit of labor, both for the curable and incurable insane, we have been long impressed. It promotes health, induces sleep, favors self-control, satisfies the individual of the confidence reposed in him by the officers of the institution, and produces quiet and contentment.

"As far as possible, we give employment to all who are able to perform labor. Preferring agricultural and horticultural operations, we devote a large share of industry to these departments of labor.

"In addition to this, the care of the roads and pleasure-grounds, transplanting trees, and making various improvements, repairs, and operations, both doors and out,—sawing, splitting, and piling wood, preparing hair for mattresses, procuring vegetables from the garden, and preparing them for cooking, and many other operations,—are daily performed by the patients. One or two male patients are generally employed about the kitchen, laundry, and cellars ; one always in the wash room, and more or less about the barn, shops, &c.

"In the female department there is no less industry. Almost all are profitably employed. One tailoress, while under the influence of medical treatment, has earned by her needle money enough to defray all her expenses for six months, and actually pays her own bills."

"The Hospital is one community. The labor of all goes for the general benefit ; and, so far as the labor, thus bestowed, saves the employment of additional help, it diminishes the charge of support. The institution can fairly claim the avails of the labor ; for it is by its system of discipline that the labor of this class of individuals can be made available for any valuable purpose.

"In the winter of 1837, the business of manufacturing shoes was first commenced at the Hospital, since which time more or less labor has been done by the patients, in this department of industry.—*Seventh Report*, p. 93.

The superintendent of the McLean Asylum, Dr. Bell, says :

"There is one appliance of moral treatment, which has been proved immeasurably superior to all others, as regards a large class of male patients. It is a systematic, regular employment in useful bodily labor. There is, probably, no institution in the world, where the value of this has been more fully tested, than in this. Five years since, a large carpenters' shop was fitted up, and furnished with tools, and a suitable carpenter, who was also experienced in attending upon the insane, was provided ; and then the novel attempt was made to intrust all the sharp and dangerous instruments for working in wood, in the hands of the insane patients. From that day to this, some hundreds of male patients have been employed in this way, and not the

slightest accident has ever occurred. The branch of employment pursued has been the manufacturing of boxes for soap, candles, ink, hats, &c., as requiring just about enough skill and dexterity to stimulate patience and ingenuity, and yet not requiring such nice workmanship as to discourage the inexperienced. Two years and a half since, the cells originally provided for the security of frantic subjects, were removed, and the space left, 50 feet by 25, fitted up for a carpenters' shop; for our own experience has satisfied us, that this was henceforth to form an indispensable adjunct in our moral means.

"Although the number of patients employed in the work shop has always been considerable, yet, from various circumstances, the profit from our mechanical labors has always been little or nothing;—a result which we have not been disposed to regret, since, the fact being known, no suspicion can be indulged by our inmates, that any selfish motives are at the bottom of our constantly encouraging them to labor.

"Some of the results of labor in this form are interesting. The class of patients whose former avocations have been the farthest removed from mechanical employments,—such as merchants, lawyers, and physicians,—have been found amongst those most willingly and usefully interested. A certain class of melancholic and stupid subjects, when once thus engaged, are almost sure to recover."—*Twenty-second Report*, pp. 25 and 26.

The superintendent of the Western Asylum in Virginia, Dr. Francis T. Stribling, says :

"For the laborers, who constitute the larger class of our patients, we have about 65 acres of land contiguous to, and almost surrounding, the buildings, in the cultivation of which it is designed that they shall be employed. This property was acquired about eighteen months since, at which time it was unenclosed, and in a rough and sterile condition. During the past year, however, the patients, unaided by a mechanic, have surrounded most of it with a neat board fence, constructed in a substantial and workmanlike manner. They have also gathered into piles, and assisted in removing from the land, a large quantity of stone, and have it now in an arable condition; so that, by the next season, they anticipate reaping from it a reward for their labor. In addition to this, the class of patients of whom we are speaking, have cut and piled a quantity of wood, have excavated and removed a large portion of earth, and have assisted in hauling a quantity of water. . . . Had the institution been compelled to pay for the labor thus performed, at the ordinary rates of the country, it would have amounted, I am confident, to not less than from \$600 to \$700. But few of the patients here are mechanics, and hence we have not felt so much the importance of work shops, as would have been the case had our institution been located in a manufacturing instead of an agricultural region of country. We design, however, as soon as it can be conveniently accomplished, to provide such shops for those who may already understand, or be disposed to learn, some of the ordinary branches of mechanics.

"Many of the female patients are employed in knitting, sewing, &c.; and we hope ere long so to arrange it, that a certain class in this department will afford considerable aid in cleaning the house, in doing the

washing and ironing, and in spinning, weaving, and making up the coarse clothing for themselves and others.—*Report*, p. 19.

(6.) *Value and Importance of Reading, to the Insane.*

The superintendent of the hospital at Worcester, Dr. Woodward, says:

"During the past year, the library of the hospital has been greatly increased, and the spirit of reading has been very generally throughout the institution. In addition to the respectable collection of books made during the last and previous years, we have purchased many modern works, which have made a very good library, now consisting of about 180 volumes. We have received contributions from quite a number of individuals, which have constantly afforded us a sum for expenditure for such books as it might be desirable to purchase.

"The newspapers are always in great demand. Whenever they arrive, they are called for by our patients who reside in the vicinity of their publication; and all the papers are read till nearly worn out, passing from gallery to gallery about the institution.

"Next to labor, reading is the most valuable and extensive means of improvement adopted in the hospital. By it the mind is quieted, and rendered tranquil; old associations are renewed; matter for rational conversation and reflection is obtained. This influence, daily impressed, is most important for the insane."—*Seventh Report*, p. 97.

The superintendent of the McLean Asylum at Charlestown, Mass., Dr. Luther V. Bell, says:

"A library of a few hundred volumes suitably adapted, many weekly and daily newspapers, and a commenced cabinet of minerals, afford additional means of filling up every vacant hour."—*Twenty-second Report*, p. 24.

The superintendent of the Ohio Lunatic Asylum Dr. Wm. M. Aul, says:

"We take this opportunity of returning our thanks to the editors who have, in the most kind manner, supplied us with copies of their several papers for the use of the inmates of the institution. They have been most thankfully received by the patients, and we hope other printers in the State may be induced to follow their example. *I know they would, if they knew how much newspapers and periodicals are read and appreciated by our convalescing patients.* We have, it is true, the other means of amusing and interesting them, which are common to institutions of this description in the United States; but they are of small regard, compared with the value of books and periodicals, and I know of no one thing more desirable, in the Ohio Lunatic Asylum, than a well selected library of useful and interesting books."—*Second Report*, p. 29.

The superintendent of the the Western Lunatic Asylum in Virginia, Dr. Stribling, says,—

"The library, which contains upwards of 300 volumes, continues to afford much useful and pleasant employment. A large number of those patients who have been admitted during the past year, belonged to the higher ranks in life, and, having possessed the advantages of an education, they have seemed partial to literary pursuits; hence more of the books have been perused than during any former period, and

this class of patients are rapidly increasing, we can but be gratified, that the institution is in possession of so desirable and useful a means for their amusement and accupation."—*Report*, pp. 19 and 20.

(7.) *Value of Religious Exercises to the Insane.*

The superintendent of the Vermont Asylum says :

"The religious exercises at the institution have been continued as formerly. Our new chapel affords a very commodious, neat, and convenient place for meeting on the Sabbath. * * * *

Much of the good effects of religious worship depends on the prudence and discretion with which it is managed. We consider the judicious employment of religious exercises an important part of our moral treatment. They serve to promote order, revive their former grateful habits and associations, and recall into exercise that self-control which tends to their recovery. That religion which breathes peace on earth and good will to men, and whose cheering influences extend beyond the grave, affords solace and consolation to the insane, as well as comfort to the rational mind. No one, who has witnessed the influence of the Christian religion on the human mind, can for a moment doubt its efficacy in producing serenity under all the trials of life, and preventing that shipwreck of reason which would otherwise inevitably have followed. I have always noticed that the humble believer in Christianity recovered more readily from insanity than one who was not. As soon as the former has a return of one ray of reason, he has something to which he clings, and which soothes and sustains him under all his troubles. From the effect of proper religious exercises upon the mind of the insane, we have no doubt but the time will soon come when their use will be considered an important moral means in the management of every well regulated asylum."—*Third Report*, pp. 22 and 23.

The superintendent of the State Lunatic Hospital at Worcester, Dr. Woodward says :

"Four fifths of the patients who have been in the Hospital during the last year, have attended the exercises of the chapel on the Sabbath, and most of them regularly. The congregation varies from 175 to 200 and upwards. The experience of each day strongly impresses us with the benefit of these religious services. They have a direct and constant influence upon the conduct and feelings of many individuals, and perhaps upon nearly all.

"The Author of Christianity, while upon earth, relieved the malady of the insane by a miracle ; the religion which he taught has the same spirit as its Author. It is only where Christianity prevails that institutions for the relief of the insane are found. It is the spirit of Christianity that founds and fosters them. Unless the same spirit influences those who minister in them, they cease to be humane and benevolent asylums, and become truly bedlams and mad-houses.

"No class of mankind more truly need the influence of religion than the insane. With a sufficiently powerful motive, they can, to a great extent, govern and control their conduct ; they can be made to feel responsibility, to know that they should not do wrong, and that they are

amenable for their bad conduct, just so far as they know how, and are able, to do better.

"Insanity does not make mankind better. If the rational give way to passion and temper, and suffer themselves to be influenced by bad motives, the maniac does this no less because he is insane. He may have been a bad man independent of his disease, and he may also have been a good man independent of it. As I have elsewhere remarked, his whole mind is not always insane; there are chords in his intellect and moral feelings which can be made to vibrate by proper touches; and the response may change his whole character, and influence his whole conduct. His moral feelings may be sound and healthy, if his intellect is disturbed by illusions; or his understanding may, to a great extent, be rational, when his feelings are perverted and his whole moral nature estranged. It is by appeals to the understanding and the sensibilities through these healthy avenues, that the mind is reached by the moral influence which we exert, and this is also the avenue for religious influence.

"Regular religious teaching is as necessary and beneficial to the insane as to the rational mind; in a large proportion of the cases, it will have equal influence. They as well know their imperfections, if they will not admit their delusions, and they feel the importance of good conduct to secure the confidence and esteem of those whose good opinion they value.—*Seventh Report*, p. 100.

The superintendent of the McLean Asylum, Dr. Bell, says:

"At the close of each day, after tea is over, all those who are in such condition as to render their presence safe and proper, are invited to the services of evening devotion, which are held in the large oval room of the mansion-house. The number of those who avail themselves of this privilege, varies with the ever-changing character of our inmates; it is, however, rarely below one half the number, and reaches to three quarters. The services consist in reading a portion of the sacred writings, some proper religious reflection, a prayer, with the singing of two psalms or hymns, which last exercise is assisted in by those of the patients having musical skill.

"On the Sabbath, all such as are in proper condition, attend some of the various churches in the vicinity, according as their preferences or early habits may dictate a selection. At one church, our average number of worshippers is from 12 to 20 every Sabbath, and the whole number usually abroad at public worship is perhaps about 30.

"As the motives to self-control and self-respect are augmented by such a participation in society as public worship amongst the world affords, I believe the course pursued here, especially as it has never yet caused the slightest inconvenience or disturbance to the religious societies which we attend, is superior for our class of patients, to having a specific chapel for the insane. On Sunday evenings, we have a discourse, to which many of those whom it would not be deemed prudent to take abroad to church, are invited.

"The regulated, discriminating, and cautious attention to the exercises of religion, is so valuable an auxiliary to the moral means of treat-

ing diseased mind, not less from its specific influences on the heart and feelings, than from its administering to the self-control of the individual, that we have rejoiced to see the experience of this institution adopted into others."—*Twenty-second Report*, pp. 24 and 25.

(8.) *Insane Asylums of inestimable value in ameliorating the condition of the Incurable.*

The superintendent of the Vermont Asylum, Dr. Rockwell, says :

"The improvement of our incurable patients is an object of little less importance than the restoration of those who are curable. To improve an old case which has been abandoned as deperate, to awaken his self-respect, to call into exercise his powers of self-control, and cause him to observe the decencies and civilities of life, require no less skill than to restore those who are not beyond the means of cure. The improvement of our incurable patients has been great. Many of the noisy, the furious, and the violent, have become quiet and orderly ; the filthy have become neat ; and many that required much attention from others, now assist in performing the duties of the institution."

"Were there no other advantages derived from an asylum of this kind, than the increased comfort of the insane, and the relief from anxiety which friends experience when they are placed in an asylum, there would be a sufficient remuneration for the expense of the establishment. Those who are now confined in cages and strong rooms, shut out from all the comforts of life, and whose existence is one continued scene of human suffering, need some situation where they can be treated as fellow-beings, and receive those curative means that will result in their recovery."—*Third Report*, p. 21.

The superintendent of the McLean Asylum, Dr. Bell, says :

"To refuse all but promising cases, would be at once to throw aside one of the great designs of the founders of the Hospital, which was not more the cure than the amelioration of the patients. Often the amount of good—extended, widely-felt good—afforded by the safe-keeping and ameliorated condition of an insane person to his friends, is greater than of an ordinary case of recovery."—*Twenty-second Report*, p. 15.

XVIII. THE FOLLOWING TABLE

Is chiefly taken from a review of Esquirol on Mental Diseases, in the American Journal of Medical Sciences.

COUNTRIES.	Population.	No. of insane.	Ratio.	CITIES.	Population.	No. of insane.	Ratio.
England, -----	13,089,358	16,222	1 in 807	London, -----	1,400,000	7,000	1 in 200
Scotland, -----	2,365,807	3,652	1 in 648	Paris, -----	890,000	4,000	1 in 222
France, -----	32,000,000	32,000	1 in 1,000	Petersburgh, --	377,000	120	1 in 3,142
Norway, -----	1,051,300	1,909	1 in 551	Naples, -----	370,000	479	1 in 772
Ireland, -----	7,784,536	10,059	1 in 774	Cairo, -----	330,000	14	1 in 23,572
Belgium, -----	3,816,000	3,763	1 in 1,014	Madrid, -----	204,000	60	1 in 3,400
Holland, -----	2,302,000	2,300	1 in 1,001	Rome, -----	154,000	320	1 in 480
Italy, -----	16,789,000	3,441	1 in 4,876	Milan, -----	151,000	618	1 in 244
Spain, -----	4,085,000	569	1 in 7,180	Turin, -----	114,000	331	1 in 341
United States, --	17,068,666	17,434	1 in 978	Florence, -----	80,000	236	1 in 339
Westphalia, ----	-----	-----	1 in 846	Dresden, -----	70,000	150	1 in 466
Saxony, -----	-----	-----	1 in 968				
Malta and Gozo.	120,000	130	1 in 932				
Upper Canada, --	-----	136	1 in 3,000				

XIX., EXTRACTS FROM THE 16th ANNUAL
REPORT OF THE PRISON DISCIPLINE
SOCIETY, BOSTON, 1841.

(1.) *Number of persons who become insane annually.*

"In the year 1835, there were received into three of the institutions in Massachusetts, from that State about 124 patients, who became crazy that year."—*Dr. Brigham.*

This number is estimated, by the same author, to be probably not more than one half of all who became insane, in the same State, during the same period. If this statement and opinion be made the basis of an institution, it will give, as the number who became insane annually, in the United States, 5,719.

(2.) *In what extent is provisions made for the Insane in the United States ?*

We have seen, from the returns of the late United States census, that the whole number of the insane (including idiots) is 17,181, and the number of those who become insane annually, by estimate, 5,719.

According to the tabular view of eleven asylums, hereto annexed, the whole number under treatment, in these institutions, last year, was 1,470 ; and the number received into them, during the year, 932. There are five other asylums in operation, from which returns have not been received, which may increase the whole number under treatment to 1800, or possibly to 2000 ; (Dr. Brigham's estimate is 1800 ;) while the number received annually may be 1200. When the asylum at Utica, for the accommodation of 1000, is completed, 3000 may have provision made for their accommodation each year, and 1500, or possibly 1800, for their reception : so that *the great work* of making suitable provision for the 17,181 insane in the United States, and the 5,719 who become annually insane, *is well begun*, but not more than, *one fourth or fifth part accomplished.*

(3.) *Proportion of Recoveries in well conducted Asylums.*

The following table, from Dr. Brigham's last report, with a few items added from Dr. P. Earle's visit, shows the proportion of recoveries to the whole number of cases, (old and recent,) in some of the most celebrated hospitals for the insane, both in Europe and the United States.

HOSPITALS.		Date of reports.	No. of patients.	No. of recoveries.	Per cent.
Bethlehem, England,*	-----	1748 to 1794,-----	8,874	2,557	28.81
do do	-----	In 1813,-----	422	204	48.34
do do	-----	1819 to 1833,-----	2,445	1,124	45.56
St. Luke's,*	-----	1751 to 1801,-----	6,458	2,811	43.52
Wakefield,	-----	1819 to 1836,-----	2,242	991	44.20
Lancaster, do	-----	1817 to 1832,-----	1,750	697	39.82
Gloucester, do	-----	8 years,-----	-----	-----	48.00
Stafford, do	-----	Unknown,-----	1,000	429	42.90
Retreat, near York, England,	-----	1796 to 1835,-----	508	236	46.43
York, at do	-----	1815 to 1837,-----	1,131	387	34.21
Cork, Ireland,-----	-----	20 years,-----	1,431	751	52.48
Perth, Scotland,-----	-----	5 do -----	-----	-----	46.00
Amsterdam, Holland,-----	-----	2½ do -----	163	56	34.35
Utrecht, do -----	-----	1832 to 1837,-----	255	104	40.78
Turin, Italy,-----	-----	1827 to 1836,-----	1,066	460	45.59
Aversa, do -----	-----	1813 to 1833,-----	3,897	1,514	38.85
Sanavra, Milan,-----	-----	25 years,-----	-----	-----	58.00
Pennsylvania, United States,-----	-----	1752 to 1836,-----	4,116	1,349	32.77
Frankford Retreat, Pennsylvania,-----	-----	1817 to 1838,-----	507	214	42.21

Bloomington, New-York,	1821 to 1835,	1,915	828	43.23
do	1838 to 1839,	235	141	60.00
Bellevue,	1791 to 1821,	1,553	704	45.33
Retreat, Hartford, Connecticut,	1824 to 1840,	1,068	600	56.17
M'Lean, Charlestown, Massachusetts,	1818 to 1840,	1,749	761	43.51
do	1835 to 1840,	734	399	60.00
Columbus, Ohio,	1 year,	258	80	31.00
Brattleboro', Vermont,	3 years,	239	89	37.23
Worcester, Massachusetts,	7 do	1,196	506	42.30
Salpêtrière, France,	12 do	3,007	1,625	54.04
Charenton, ¹ do	8 do	1,205	516	42.82
Ivry, Paris,	12 do .....	.....	.....	51.00

* Both these hospitals, near London, reject, as *unfit*, "all persons who have been insane more than a year, all those affected by paralysis and epilepsy, and all the aged and infirm," while other institutions in the table, are by law required to receive all that are sent by overseers of poor, &c. This diversity of position should be duly estimated in comparing different institutions.

There is another circumstance which should not be forgotten. Asylums recently opened suffer by a comparison with older ones, if the *per cent of cures* is reckoned upon the *whole number admitted*. Thus the Ohio Asylum, in the table has credit for only 31 *per cent* upon 258, the whole number admitted, while, if calculated upon the *discharges*, it would have been nearly 67 *per cent*. An examination in the same institutions, the proportion of recoveries to the number of recent cases, is from 80 to 90 *per cent*, while the old cases give only 15 to 35 *per cent*.

(4.) *Mortality in Lunatic Asylums.*

We find a valuable table on this subject, in Dr. Earle's book on Insanity and Asylums for the Insane, which shows that in 19 public institutions, some of them going back to 1752, or 88 years, from 1840, with 35,096 patients, the average mortality was 19 per cent. In the British asylums it was 21 per cent; in the French 32; in the American, (including Kentucky, where the cholera raged, 12 per cent,) 9 per cent.

(5.) *Statistics of eleven Asylums in the United States, for 1840.*

ASYLUMS.		No. at beginning of the year 1840.	Received during the year.	Whole number under treatment, 1840.	Removed in 1840.	Much improved in 1840.	Improved in 1840.	Died in 1840.	Remaining at close of year.	Whole number admitted from the first.	Whole number recovered from the first.	Time of opening the institutions.
City or town, and state.												
Philadelphia, Penn.	.....	65	54	119	25	5	9	4	59	3718	1289	1752
Frankford, Penn.	.....	108	155	263	75	12	20	13	125	688	239	1817
Charlestown, Mass.	.....	118	133	251	68	...	32	14	126	1856	802	1818
Bloomington, N. Y.	.....	...	84	...	50	...	...	2	...	...	...	1821
Hartford, Ct.	.....	48	36	84	21	10	4	5	26	1001	563	1824
Hudson, N. Y.	.....	229	162	391	82	...	29	15	236	1000	563	1830
Worcester, Mass.	.....	69	73	142	33	...	13	6	81	1196	506	1833
Brattleboro', Vt.	.....	114	101	215	53	2	...	14	128	...	...	1836
Columbus, Ohio.	.....	...	104	104	5	...	1	2	87	258	80	1838
South Boston, Mass.	.....	...	30	30	1	...	1	...	28	104	5	1839
Augusta, Maine.	.....	...	...	...	...	...	...	...	...	30	1	1840
11 Asylums,*	.....	686	932	1470	413	29	109	75	857	9849	3843	

* Several of these totals should be varied, in consequence of the addition of several items in the above table, which were left blank by the Prison Discipline Society. As no item has been added without good authority, it is believed the aggregates should be increased to conform to the facts thus supplied.

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